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

1,7 1,0	650				Tital, (2) modiumoc di		rry, and (3) building owner	
A4 Duildie O and N						OR INSURANCE COMPANY USE		
LGI Homes					Policy Nur	nber:		
A2. Building Street Address (including Ant. Unit. Suite, and/or Bldg, No.) or B.O. Boute and				Company	company NAIC Number:			
City				State		ZIP Code		
Woodland				Washington		98674		
A3. Property Desc Lot 109, Meriwe		nd Block Numbers, Tax	Parce	el Number, Legal De	escription, etc.)	34.4		
A4. Building Use (e.g., Resider	ntial, Non-Residential, A	dditior	n, Accessory, etc.)	Residential			
A5. Latitude/Longi				122°44'04.48"	Horizontal Datum	· 🗆 NAD	1927 × NAD 1983	
A6. Attach at leas	2 photograp	hs of the building if the					1021 N 14AD 1903	
A7. Building Diagr		9			- Cartani Nood Modic			
		pace or enclosure(s):		42				
		space or enclosure(s)		796 sq ft				
		ood openings in the cra	wisnac		vithin 1 0 foot above	adjacent or	ado 12	
		penings in A8.b 92		sq in	1.0 1001 2004	aujacent gr	ade 12	
				34 III				
	d) Engineered flood openings? Yes No							
	A9. For a building with an attached garage:							
a) Square foot	a) Square footage of attached garagesq ft							
b) Number of	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0						0	
c) Total net are	ea of flood op	enings in A9.b()	sq in				
d) Engineered flood openings? Yes X No								
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Community Name & Community Number			B2. County Name			B3. State		
City of Woodland 53	50035			Cowlitz			Washington	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Ef	IRM Panel fective/	B8. Flood Zone(s)	(Zor	e Flood Elevation(s) ne AO, use Base	
5301C0886	G	12/15/2016	Revised Date 12/15/2016 AE		AE		Flood Depth) 37.4'	
B10. Indicate the so	ource of the E	Base Flood Elevation (E	FE) da	ata or base flood de	oth entered in Item I	30.		
		Community Determi			par emerce in term			
B11. Indicate eleva	tion datum us	sed for BFE in Item B9:	□ No	GVD 1929 🗵 NA	VD 1988	er/Source:		
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Tyes X No								
Designation Date: CBRS OPA								
=111								

ELEVATION CERTIFICATE

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Building Street Address (including Apt., Unit, Suite, and 347 York Street	d/or Bldg, No.) or P.O. Rou	ite and Box No.	Policy Number:	
	State ZIP Washington 986	Code 74	Company NAIC Number	
SECTION C - BUILDING			FOUIRED)	
C1. Building elevations are based on: *A new Elevation Certificate will be required when C2. Elevations – Zones A1–A30, AE, AH, A (with BFI Complete Items C2.a–h below according to the benchmark Utilized: WSDOT/NOAA Indicate elevation datum used for the elevations in NGVD 1929 NAVD 1988 Other Datum used for building elevations must be the sea. a) Top of bottom floor (including basement, craw b) Top of the next higher floor c) Bottom of the lowest horizontal structural mem d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment so (Describe type of equipment and location in C6 f) Lowest adjacent (finished) grade next to building Highest adjacent (finished) grade next to building	n construction of the building to construction of the building to construction of the building to construct on items a) through h) belower/Source: ame as that used for the Building to construct on the construction of the building comments) In construction of the building to construct on the construction of the building comments on the construction of the building constructi	FE), AR, AR/A, AR/ n Item A7. In Puert NAVD 1988 w.	Check the measurement used. Check the measurement used. Check the measurement used. Check the measurement used. Feet meters Feet meters	
g) Highest adjacent (finished) grade next to build	ing (HAG)	40.0	x feet meters	
h) Lowest adjacent grade at lowest elevation of d structural support	eck or stairs, including	<u>39</u> . <u>3</u>	X feet meters	
SECTION D - SURVEYO	R, ENGINEER, OR ARC	HITECT CERTIFIC	CATION	
This certification is to be signed and sealed by a land so I certify that the information on this Certificate represent statement may be punishable by fine or imprisonment. Were latitude and longitude in Section A provided by a	nts my best efforts to interpunder 18 U.S. Code, Section	oret the data availat ion 1001.	ble. I understand that any false	
		E Tes LINO	Check here if attachments.	
Certifier's Name Howard S. Richardson Title PLS Company Name	License Number 38485		1007	
Olson Engineering, Inc.			Seal	
Address 222 E. Evergreen Blvd.			Here	
City Vancpuver		ZIP Code 98660	12-15-17	
Signature		Telephone		
	7-12 11	(360) 695-1385		
Copy all pages of this Elevation Certificate and all attachm		cial, (2) insurance ag	gent/company, and (3) building owner.	
Comments (including type of equipment and location, p. A5 was taken from GoogleEarth. C2-elevations are bas adjusted using OPUS. C2e is to the bottom of the water north side of the structure.	ed on fast static GPS obse	ervations on NOAA ige. C2h is the botto	and WSDOT benchmarks and om of the roof support pier on the	

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IMPORTANT: In these spaces, copy the correspon	ding information	from Section A.		FOR INSURAN	ICE COMPANY USE
Building Street Address (including Apt., Unit, Suite, ar 347 York Street	nd/or Bldg. No.) or	P.O. Route and E	Box No.	Policy Number:	
City Woodland	State Washington	ZIP Code 98674		Company NAIC	Number
SECTION E – BUILDING E FOR ZON	LEVATION INFO	RMATION (SUR E A (WITHOUT I	VEY NOT BFE)	REQUIRED)	
For Zones AO and A (without BFE), complete Items E complete Sections A, B,and C. For Items E1–E4, use enter meters. E1. Provide elevation information for the following and the bishest additional and (ILAC) and the language	natural grade, if av	railable. Check the	e measurer	ment used. In Pu	erto Rico only,
the highest adjacent grade (HAG) and the lowest a) Top of bottom floor (including basement, crawlspace, or enclosure) is	adjacent grade (L/	AG). ∏ feet	meter	S. Cabaya as	
b) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is		_	meters	V	below the HAG. below the LAG.
E2. For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in the diagrams) of the building is	openings provided	in Section A Item		_	of Instructions),
E3. Attached garage (top of slab) is		[] feet	meters	above or	below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is		[] feet	meters	above or	below the HAG.
E5. Zone AO only: If no flood depth number is availab floodplain management ordinance? Yes	le, is the top of the No Unknow	bottom floor elev vn. The local offi	rated in accicial must c	ordance with the ertify this informa	community's ition in Section G.
SECTION F - PROPERTY OW	NER (OR OWNER	'S REPRESENT	ATIVE) CE	RTIFICATION	
The property owner or owner's authorized representation community-issued BFE) or Zone AO must sign here. The property owner is authorized representation of the property owner or owner's authorized representation.	he statements in S	Sections A, B, and ections A, B, and	d E for Zor E are corre	ne A (without a Flect to the best of	EMA-issued or my knowledge.
Property Owner or Owner's Authorized Representative	's Name				
Address	Ci	ty	Stat	te	ZIP Code
Signature	Da	ate	Tele	phone	
Comments					
				Charlet	a if attack
				check her	e if attachments.

ELEVATION CERTIFICATE

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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: 347 York Street City State ZIP Code Company NAIC Number Woodland Washington 98674 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. Check the measurement used in Items G8-G10. In Puerto Rico only, enter meters. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor. engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.) A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) G2. or Zone AO. The following information (Items G4-G10) is provided for community floodplain management purposes. G4. Permit Number G5. Date Permit Issued G6. Date Certificate of Compliance/Occupancy Issued G7. This permit has been issued for: G8. Elevation of as-built lowest floor (including basement) feet meters Datum of the building: 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 location, per C2(e), if applicable) Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Building Street Address (including 347 York Street	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

Photo One Caption FRONT (east) SIDE 12/14/17



Photo Two

Photo Two Caption REAR (east) SIDE 12/14/17

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.

This form must be completed for requests involving the existing or proposed placement of fill (complete Section A) OR to provide acknowledgment of this request to remove a property from the SFHA which was previously located within the regulatory floodway (complete Section B). This form must be completed and signed by the official responsible for floodplain management in the community. The six digit NFIP community number and the subject property address must appear in the spaces provided below. Incomplete submissions will result in processing delays. Please refer to the MT-1 instructions for additional information about this form. Lot 109, Meriwether PURD Ph2, (Vol. 14, Pg.112) 530035 Community Number: __ Property Name or Address: 347 York St. Woodland, WA 98674 A. REQUESTS INVOLVING THE PLACEMENT OF FILL As the community official responsible for floodplain management, I hereby acknowledge that we have received and reviewed this Letter of Map Revision Based on Fill (LOMR-F) or Conditional LOMR-F request. Based upon the community's review, we find the completed or proposed project meets or is designed to meet all of the community floodplain management requirements, including the requirement that no fill be placed in the regulatory floodway, and that all necessary Federal, State, and local permits have been, or in the case of a Conditional LOMR-F, will be obtained. For Conditional LOMR-F requests, the applicant has or will document Endangered Species Act (ESA) compliance to FEMA prior to issuance of the Conditional LOMR-F determination. For LOMR-F requests, I acknowledge that compliance with Sections 9 and 10 of the ESA has been achieved independently of FEMA's process. Section 9 of the ESA prohibits anyone from "taking" or harming an endangered species. If an action might harm an endangered species, a permit is required from U.S. Fish and Wildlife Service or National Marine Fisheries Service under Section 10 of the ESA. For actions authorized, funded, or being carried out by Federal or State agencies, documentation from the agency showing its compliance with Section 7(a)(2) of the ESA will be submitted. In addition, we have determined that the land and any existing or proposed structures to be removed from the SFHA are or will be reasonably safe from flooding as defined in 44CFR 65.2(c), and that we have available upon request by DHS-FEMA, all analyses and documentation used to make this determination. For LOMR-F requests, we understand that this request is being forwarded to DHS-FEMA for a possible map revision. Community Comments: Community Official's Name and Title: (Please Print or Type) Telephone No.: Community Name: Community Official's Signature: (required) City of Woodland 530035 B. PROPERTY LOCATED WITHIN THE REGULATORY FLOODWAY As the community official responsible for floodplain management, I hereby acknowledge that we have received and reviewed this request for a LOMA. We understand that this request is being forwarded to DHS-FEMA to determine if this property has been inadvertently included in the regulatory floodway. We acknowledge that no fill on this property has been or will be placed within the designated regulatory floodway. We find that the completed or proposed project meets or is designed to meet all of the community floodplain management requirements. Community Comments: Community Official's Name and Title: (Please Print or Type) Telephone No.: Community Name: Community Official's Signature (required): Date: City of Woodland 533035