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.

SECTION A - PROPERTY INFORMATION				FOR INSURANCE COMPANY USE			
A1. Building Owner's Name LGI Homes						Policy Num	iber:
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 336 York Street 					. Route and	Company N	NAIC Number:
City Woodland		State Washington				ZIP Code 98674	
A3. Property Desc Lot 117, Meriwe		nd Block Numbers, Tax /ol. 14, Pg. 112)	« Parce	l Number, Legal De	escription, etc.)		
A4. Building Use (e.g., Residen	itial, Non-Residential, A	Addition	, Accessory, etc.)	Residential		
A5. Latitude/Longi	tude: Lat. 4	5°55'27.19"	Long	-122°44'03.51"	Horizontal Datum	ı: NAD '	1927 × NAD 1983
A6. Attach at least	2 photograpi	hs of the building if the	Certific	cate is being used to	o obtain flood insura	ance.	_
A7. Building Diagra	am Number	9					
A8. For a building	with a crawls _i	pace or enclosure(s):					
a) Square foo	tage of crawls	space or enclosure(s)		1,396 sq ft			
b) Number of	permanent flo	ood openings in the cra	ıwlspac	æ or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade20
c) Total net ar	ea of flood op	penings in A8.b1,54	40 :	sq in			
d) Engineered	flood opening	gs? 🗌 Yes 🗵 No	o				
A9. For a building v	with an attach	ied garage:					
a) Square footage of attached garage 400 sq ft							
				•	ot above adjacent o	rado	n
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade0 c) Total net area of flood openings in A9.b 0 sq in							
d) Engineered	·		0	sq in			
u) Engineerea	noou opening	gs? [] Yes [x] No	J				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Communi	-	ommunity Number		B2. County Name			B3. State
City of Woodland 5	30035			Cowlitz			Washington
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel B8. Flood Zone Effective/ Revised Date		B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)	
5301C0886	G	12/15/2016	1	/2016	AE	1	7.5'
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 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 D				OPA			· ••••••
		MMANNE the transfer and an analysis and an ana					

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Building Street Address (including Apt., Unit, Suit 336 York Street	Policy Number:				
City Woodland	State ZIP Washington 986	Code 74	Company NAIC Number		
SECTION C - BUILI	DING ELEVATION INFORMA	TION (SURVEY RI	EQUIRED)		
	• —	Iding Under Constru	ction* X Finished Construction		
*A new Elevation Certificate will be required		• •	45 45 44 460 45 W		
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 eleva ☐ NGVD 1929 ☒ NAVD 1988 ☐		w.			
Datum used for building elevations must be		BFE.			
		. 27 7	Check the measurement used.		
a) Top of bottom floor (including basemen	t, crawispace, or enclosure floor	•			
b) Top of the next higher floor		40. <u>5</u>	X feet meters		
c) Bottom of the lowest horizontal structure	al member (V Zones only)	N/A 38, 8	X feet meters		
d) Attached garage (top of slab)			X feet meters		
 e) Lowest elevation of machinery or equip (Describe type of equipment and location 	ment servicing the building on in Comments)	40. 3	X feet meters		
f) Lowest adjacent (finished) grade next to	building (LAG)	<u>38</u> , <u>8</u>	X feet meters		
g) Highest adjacent (finished) grade next t	o building (HAG)	<u>38</u> . <u>8</u>	🔀 feet 🗌 meters		
 h) Lowest adjacent grade at lowest elevati structural support 	on of deck or stairs, including	N/A.	x feet meters		
SECTION D - SUR	VEYOR, ENGINEER, OR ARC	CHITECT CERTIFI	CATION		
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 No Check here if attachments.					
Certifier's Name	License Number		COUTAN		
Howard S. Richardson Title	38485				
PLS					
Company Name			Hace Place		
Olson Engineering, Inc.					
Address	dere see a s				
222 E. Evergreen Blvd.					
City Vancpuver	State Washington	ZIP Code 98660	10-BI-17		
Signature	Date 10-31-17	Telephone (360) 695-1385			
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, C2-elevations are based on fast static GPS observations on NOAA and WSDOT benchmarks and adjusted using OPUS, C2e is to the bottom of the water heater located in the garage.					
Sujusted using OFOS. Oze is to the pottom of th	e water neater located in the ga	14y5.			

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: 336 York Street City State ZIP Code Company NAIC Number Woodland Washington 98674 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 ___ _ _ _ _ feet _ meters _ above or _ below the HAG. b) Top of bottom floor (including basement, crawlspace, or enclosure) is feet meters above or below the LAG. E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1-2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is __. ____ feet meters above or below the HAG. 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 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 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 Check here if attachments.

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Building Street Address (including Apt., U 336 York Street	Policy Number:		
City Woodland	State Washington	ZIP Code 98674	Company NAIC Number
SF	ECTION G - COMMUNITY IN	FORMATION (OPTIONAL)	
The local official who is authorized by law Sections A, B, C (or E), and G of this Elev used in Items G8–G10. In Puerto Rico on	vation Certificate. Complete the	e community's floodplain ma e applicable item(s) and sig	anagement ordinance can complete n below. Check the measurement
G1. The information in Section C was engineer, or architect who is audata in the Comments area below	thorized by law to certify eleva	ation that has been signed a tion information. (Indicate th	and sealed by a licensed surveyor, ne source and date of the elevation
or Zone AO.			IA-issued or community-issued BFE)
G3. The following information (Items	s G4G10) is provided for com	munity floodplain managen	nent purposes.
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	☐ New Construction ☐ S	Substantial Improvement	
G8. Elevation of as-built lowest floor (incl of the building:	uding basement)	[] feel	meters Datum
G9. BFE or (in Zone AO) depth of flooding	g at the building site:	[] feet	meters Datum
G10. Community's design flood elevation:		feet	meters Datum
Local Official's Name	7	Title	
Community Name		le le phone	
Signature	Ē	Date	44-74-
Comments (including type of equipment an	nd location, per C2(e), if applica	able)	
			:
			Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Building Street Address (including Apt., 336 York Street	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.

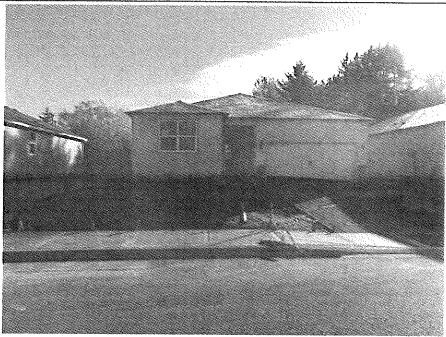


Photo One

Photo One Caption: FRONT (West) SIDE 10/31/17

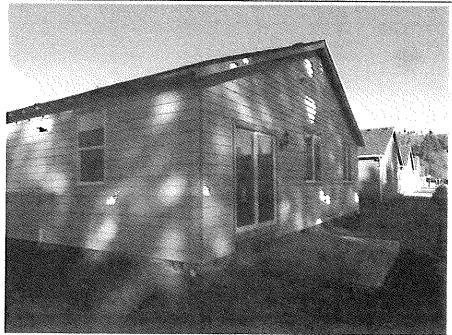


Photo Two

Photo Two Caption: REAR (East) SIDE 10/31/17

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 the accuracy of the burden estimate and any suggestions for Federal Emergency Management Agency, 1800 South Bell Scompleted form to this address.	for reducing this burden to: Informat	ation Collections Management	nt. Department of Homeland Security	
This form must be completed for requests involving the exi- remove a property from the SFHA which was previously loc	isting or proposed placement of fill cated within the regulatory floodwa	(complete Section A) OR to p ay (complete Section B).	provide acknowledgment of this request to	
This form must be completed and signed by the official respondence property address must appear in the spaces provided for additional information about this form.	ponsible for floodplain managemen ded below. Incomplete submission	ns will result in processing de	elays. Please refer to the MT-1 instructions	
Community Number: 530035	Lot 117, Meriwether PURD (Vol. 14, Pg. 112) Property Name or Address: 336 York St., Woodland, WA 98674			
A. REQUESTS INVOLVING THE PLACEMENT OF FILL	***************************************			
For Conditional LOMR-F requests, the applicant has o Conditional LOMR-F determination. For LOMR-F requindependently of FEMA's process. Section 9 of the ESA an endangered species, a permit is required from U.S. For actions authorized, funded, or being carried out b Section 7(a)(2) of the ESA will be submitted. In addition the SFHA are or will be reasonably safe from flooranalyses and documentation used to make this determination approximately Community Comments:	uests, I acknowledge that compli SA prohibits anyone from "taking S. Fish and Wildlife Service or Na by Federal or State agencies, doc on, we have determined that the oding as defined in 44CFR 65.2(i rmination. For LOMR-F requests	iliance with Sections 9 and ng" or harming an endange ational Marine Fisheries Se ocumentation from the age he land and any existing or (c), and that we have availate, we understand that this	I 10 of the ESA has been achieved ered species. If an action might harm ervice under Section 10 of the ESA, ency showing its compliance with r proposed structures to be removed lable upon request by DHS-FEMA, all	
Community Official's Name and Title: (Please Print or	Type) Pric Bouce City	Administrator	Telephone No.: 360-225-729	
Community Name:	Community Official's Signatur	ure: (required)	Date:	
City of Woodland 530035	11/150	+ 2	11.7.17	
s the community official responsible for floodplain me OMA. We understand that this request is being forware agulatory floodway. We acknowledge that no fill on that the completed or proposed project meets or is desormunity Comments: Ommunity Official's Name and Title: (Please Print or Tommunity Name:	nanagement, I hereby acknowled varded to DHS-FEMA to determin this property has been or will be esigned to meet all of the comm	ine if this property has bee be placed within the design nunity floodplain managen	en inadvertently included in the nated regulatory floodway. We find	
City of Woodland 533035	Community Official's Signature	e (required).	Date:	

DHS - FEMA Form 086-0-26B, FEB 11