

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:	
BUILDING OWNER'S NAME <u>Charles Beard</u>		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>4602 Old Stage Road</u>		Company NAIC Number	
CITY <u>Central Point</u>	STATE <u>Oregon</u>	ZIP CODE <u>97502</u>	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>Assessor's Map 372W05B TL 701</u>			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments area if necessary.) <u>Residence</u>			
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. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>Jackson County, Oregon (unincorporated area)</u>		B2. COUNTY NAME <u>Jackson</u>		B3. STATE <u>Oregon</u>	
B4. MAP AND PANEL NUMBER <u>415589 0401</u>	B5. SUFFIX <u>B</u>	B6. FIRM INDEX DATE <u>9-15-93</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>4-1-82</u>	B8. FLOOD ZONES <u>A</u>	B9. BASE FLOOD ELEVATION(S) <u>1381.85</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): See attached explanation

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)

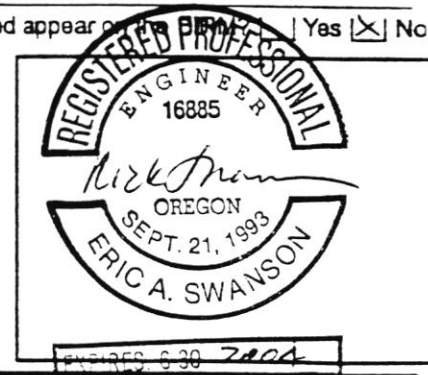
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number _____ (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.a-i 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 See attached explanation Conversion/Comments _____

Elevation reference mark used _____ Does the elevation reference mark used appear on the map? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>1386.23</u>	ft. (m)	<input checked="" type="checkbox"/>
<input type="checkbox"/> b) Top of next higher floor	_____	ft. (m)	<input checked="" type="checkbox"/>
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____	ft. (m)	<input checked="" type="checkbox"/>
<input type="checkbox"/> d) Attached garage (top of slab)	_____	ft. (m)	<input checked="" type="checkbox"/>
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.)	_____	ft. (m)	<input checked="" type="checkbox"/>
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	<u>1383</u>	ft. (m)	<input checked="" type="checkbox"/>
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	<u>1385</u>	ft. (m)	<input checked="" type="checkbox"/>
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	_____		
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h	_____	sq. in. (sq. cm)	



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 <u>Rick Swanson</u>	LICENSE NUMBER <u>16885</u>
TITLE <u>Civil Engineer</u>	COMPANY NAME <u>Margvess & Associates</u>
ADDRESS <u>1120 E. Jackson</u>	CITY <u>Medford</u>
SIGNATURE <u>Rick Swanson</u>	DATE
	STATE <u>OR</u>
	ZIP CODE <u>97501</u>
	TELEPHONE <u>541-772-7115</u>