# FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

#### **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1 - 7.

O.M.B. No. 3067-0077 Expires July 31, 2002

1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SECTION A	PROPERTY O	WNER INFOR	MATION	For Insurance Company Use:
BUILDING OWNER'S NAME					Policy Number
Keizer Sand & Gravel Co.					CÚ89-98
	Unit, Suite, and/or Bldg. No	.) OR P.O. ROUTE	AND BOX NO.		Company NAIC Number
		07175			
	bers. Tax Parcel Number.		.c.)		01001
Tax Lot 100 Map 07-3W-04	,	,	.,		
BUILDING USE (e.g., Residential, Non-residential	al, Addition, Accessory, etc	. Use Comments se	ction if necessary	<b>/.)</b>	
Truck Scale (not enclosed)					
	HORIZONTA	L DATUM:	SOURC	CE: U GPS (Type)	:
( an an anim of animana)	☐ NAD 1927 ☐	NAD 1983		USGS Quad	d Map   Other:
SEC	TION B - INSURANC	CE RATE MAP (	FIRM) INFOR	MATION	
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER	R B2	. COUNTY NAME			B3. STATE
Marion County 410154					OR
B4. MAP AND PANEL NUMBER B5. SUFFIX	B6. FIRM INDEX DATE		D DATE:	B8. FLOOD ZONE(S)	
41047C0193 G	01/19/2000		<b>-</b>	AF	
<u> </u>		<u> </u>	od depth ente	<u> </u>	
☐ FIS Profile ☐ FIRM	☐ Community	Determined	🛛 Other (D	escribe): MCPW	
				•	
B12. Is the building located in a Coast	al Barrier Resources	System (CBRS)	area or Othe	rwise Protected A	rea (OPA)? ☐ Yes ☐ No
Designation Date:					
SECTIO	N C - BUILDING EL	EVATION INFO	RMATION (SI	JRVEY REQUIRE	<b>≣D)</b>
				onstruction* 🛛 F	inished Construction
, <del>,</del>	-	•		•	- · ·
Complete Items C3a-i below according	g to the building diagran	n specified in Item	C2. State the d	atum used. If the da	atum is different from the datum
		r Section G, as ap	propriate, to do	cument the datum (	conversion.
		elevation reference	e mark used ap	pear on the FIRM?	☐ Yes ☒ No
			•		
	sement of endosure,				Signature, and Date
	ctural member (V zones	only)			
	(, , , , , , , , , , , , , , , , , , ,	,			
	nd/or equipment servic	ng the building			
☑ f) Lowest adjacent grade (LAG)			130		
X g) Highest adjacent grade (HAG)			130	.50 ft.(m)	
h) No. of permanent openings (floo	d vents) within 1 ft. abo	ve adjacent grade			
i) Total area of all permanent open	ings (flood vents) in C3	1	sq. in.	(sq. cm)	
Relizer Sand & Gravel Co.   CU89-98					
This certification is to be signed and sealed	by a land surveyor, en	gineer, or architect	authorized by I	aw to certify elevati	on information.
					ailable.
			NUMBER		
John P. Tacchini			Y NAME		
Survey Mgr Development Div		West			
BULDING OWNERS NAME  Rober Sand & Grayel Co.  BULDING STREET ADDRESS (including Apt , Unit, Suite, andro Bids No.) OR P.O. ROUTE AND BOX NO.  BULDING STREET ADDRESS (including Apt , Unit, Suite, andro Bids No.) OR P.O. ROUTE AND BOX NO.  1312 Willow Lake Rd  CITY  CREATER OR 97307  PROPERTY DESCRIPTION (i) at and Block Numbers, Tax Parcal Number, Legal Description, etc.)  TAX LOT 100 Map 107-33V-0-14  BUILLING USE [e.g. Residential Non-residential, Addition, Accessory, etc. Use Comments section if necessary.)  Truck Scale (not enclosed)  LATTITUDES CONSTITUDE (OPTIONAL)  IND 1927   NAD 1937  IND 1927   NAD 1938  SECTION B - INSURANCE RATE MAP (FIRM) INFORMATION  BIT Indicate the eleverage of the INSURANCE RATE MAP (FIRM) INFORMATION (SURVEY REQUIRED)  The Insurance Rate May (Survey And (Survey An					
			<u> </u>		31224
		12/11	/2002	(503) 68	4-0652

IMPORTANT: In these spaces,		For Insurance Company Use:		
BUILDING STREET ADDRESS (Including Willow Lake	Apt., Unit, Suite, and/or Bldg. No.) OR P.O. I	ROUTE AND BOX NO.		olicy Number CU89-98
CITY	STATE	ZIP CO		ompany NAIC Number
Keizer	OR	9730		
	I D - SURVEYOR, ENGINEER, OR			
Copy both sides of this Elevation COMMENTS	Certificate for (1) community officia	I, (2) insurance agent/com	pany, and (3)	building owner.
	ot enclosed, with concrete abutmer	its at both ends and grave	l ramps on an	d off.
The state of the s				,
, , , , , , , , , , , , , , , , , , , ,				Check here if attachments
SECTION E - BUILDING ELEV	ATION INFORMATION (SURVEY	NOT REQUIRED) FOR ZO		
For Zone AO and Zone A (withou	t BFE), complete Items E1 through -F, Section C must be completed.			
	Select the building diagram most sin accurately represents the building,			cate is being completed - see
E2. The top of the floor (including the highest adjacent grade.	basement or enclosure) of the buil	ding is   ft.(m)	in.(cm)	□ above or □ below
ft.(m)   in	th openings (see page 7), the next l .(cm) above the highest adjacent g	ade.		<u>-</u>
	depth number is available, is the to ance?			
	F - PROPERTY OWNER (OR OW	· · · · · · · · · · · · · · · · · · ·		
The property owner or owner's au community-issued BFE) or Zone	thorized representative who comple AO must sign here.	etes Section A, B, and E fo	or Zone A (with	nout FEMA -issued or
PROPERTY OWNER'S OR OWNER'S AU	THORIZED REPRESENTATIVE'S NAME			**************************************
ADDRESS		CITY	STATE	ZIP CODE
SIGNATURE	· ·	DATE	TELEPHONE	THE PARTY OF THE P
COMMENTS				
Me			Π,	Check here if attachments
	SECTION G - COMMUNITY	INFORMATION (OPTION		
	d by law or ordinance to administer this Elevation Certificate. Complete	the community's floodplair	n managemen	t ordinance can complete
G1.   The information in Section engineer, or architect who elevation data in the Comr	C was taken from other documenta is authorized by state or local law to ments area below.)	ation that has been signed certify elevation informat	and embosse ion. (Indicate	d by a licensed surveyor, the source and date of the
_	leted Section E for a building locate	d in Zone A (without a FEI	MA-issued or	community-issued BFE) or
	Items G4-G9) is provided for comm			
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATI	E OF COMPLIANCE	OCCUPANCY ISSUED
	for:   New Construction   Sul			
	oor (including basement) of the build	ling is:	ft.(m)	Datum:
G9. BFE or (in Zone AO) depth of	nooung at the building site is:	TITLE	ft.(m)	Datum:
Les Sasaki		Principal Planner		
COMMUNITY NAME Marion County		TELEPHONE (503) 588-5038		
SIGNATURE		DATE		
COMMENTS		01/29/2003		
				Check here if attachments

IMPORTANT: In these spaces, co	py the corresponding information	n from Section A.	·	For insurance Company Use:
BULDING STREET ADDRESS (Including Apt 1812 WILLOW L	Unit Suite, and/or Bidg, No.) OR P.O. RO AKE KED,	UTE AND BOX NO.		Policy Number
an Keizer		STATE	ZP000E	Company NAIC Number
	TION D - SURVEYOR, ENGINEE		97307	50)
Copy both sides of this Elevation Certifical				eu)
COMMENTS	ic of (1) cuttinuing unda, (2) itsulat	ce agenoumpary, and (3) or	illoing owner.	
THIS STRUCTURE IS	A TRUCK SCALE	, HOT ENCLE	SED, WITH	CONCRETE
ABUTMENTS AT E	BATH ENDS ALLO	GRAVEL T	A to The same	100000000
		VICK06216	BAPS ON A	WP OFF.
			· · · · · · · · · · · · · · · · · · ·	
CECTION E DUM DINO				Check here if attachmen
SECTION E - BUILDING E	ELEVATION INFORMATION (SUI	RVEY NOT REQUIRED) F	OR ZONE AO AND ZO	ONE A (WITHOUT BFE)
or Zone AO and Zone A (without BFE), cor ection C must be completed.	mplete Items E1 through E4. If the Elec	ration Certificate is intended for	ruse as supporting informa	ation for a LOMA or LOMR-F,
1. Building Diagram Number <u>I</u> (Select the I	huilding dispram most similar to the bui	irling for which this codificate i	c boing completed	C17 W #
represents the building, provide a sketch	or photograph.)	ioning for writer this continuate t	s dealig continened – see pa	ages o and /. If no diagram accurate
2. The top of the bottom floor (including bas		ft.(m)in.(cm) [] abov	e or Delow (check one	e) the highest adjacent grade. (Use
natural grade, if available).				, ,
<ol> <li>For Building Diagrams 6-8 with openings grade. Complete items C3.h and C3.i or</li> </ol>	(see page 7), the next higher floor or a	elevated floor (elevation b) of the	ne building isft.(m)	in.(cm) above the highest adjacent
For Zone AO only: If no flood depth num		a floor alcusted in sometisms	with the community a floor	haloin manana a a a a a a a a a a a a a a a a
Yes No Unknown. The	local official must certify this information	in Section G.	with the contantionary's 10000	prain management ordinance?
	ON F - PROPERTY OWNER (OR		ATIVE) CERTIFICATION	ON
he property owner or owner's authorized r				
ssued BFE) or Zone AO must sign here. T	The statements in Sections A, B, C, and	E are correct to the best of m	y knowledge.	,
PROPERTY OWNERS OR OWNER'S AL	JTHORIZED REPRESENTATIVES N	AME		<del></del>
JOHN P. TACCHINI ADDRESS	, Wesicake	CITY	STAT	T TO CODE
15115 SWSEQUOIA	PARKWAY, SUITE!	50 77GARD	UK	E ZIP CODE 972と4
SIGNATURE John P. To	-/-	DATE 12/11/02	TELE	PHONE 84 0652
COMMENTS		14/1/02	303 @	04 063 2
				☐ Check here if attachments
		ITY INFORMATION (OP)		
e local official who is authorized by law or o	rdinance to administer the community's	s floodplain management ordin	iance can complete Sectio	ns A, B, C (or E), and G of this Eleva
rtificate. Complete the applicable item(s) and $\Box$		oon sinned and embassed by	a licensed at manufact and	anne ne amhitaet utha in nuthaeiread bu
state or local law to certify elevation in	nformation. (Indicate the source and da	ate of the elevation data in the	a ice seu surveyor, engir Comments area helow l	leer, or architect who is authorized by
. 🔲 A community official completed Section	on E for a building located in Zone A (w	ithout a FEMA-issued or comm		e AO.
.  The following information (Items G4-G	39) is provided for community floodplain	management purposes.	•	
4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. D4	TE CERTIFICATE OF COMP	LIANCE/OCCUPANCY ISSUED
71:				
. This permit has been issued for: \(\subseteq\) New . Elevation of as-built lowest floor (including		ement	<b>A.</b> .	0.1
BFE or (in Zone AO) depth of flooding at the	nepartenti ar the paratili is:		ft.(m) ft.(m)	Datum: Datum:
OCAL OFFICIAL'S NAME		<del></del>	·iu(m)	Daum
		TITLE		
OMMUNITY NAME		TELEPHON	E	
GNATURE		DATE		
OMMENTS				
			· · · · · · · · · · · · · · · · · · ·	

MINISTRACT MADECO V-T-	es, copy the corresponding information fro drg Apt, Unit, Suite, and/or Bitig, No.) OR P.O. ROUTE A	IN SOCION A.		For Insurance Company Use:
18/2 WILLOG	LAKE KD,	NU BUK NU.		Policy Number
an Keizer		TATE	<b>ZP</b> 000E 97307	Company NAIC Number
	SECTION D - SURVEYOR, ENGINEER, OR	ARCHITECT C	ERTIFICATION (CONTINUE	D)
Copy both sides of this Elevation C	Certificate for (1) community official, (2) insurance age	nt/company, and	3) building owner.	
COMMENTS				
THIS STRUCTURE	5 15 A TRUCK SCACE, A	BT EXC	COSED, WITH	CONCRETE
ABUTMENTS AT	BOTH ENDS AUD G	RAUEL	RAMPSONA	UP OFF.
				C Charles and the second second
SECTION F - BUIL C	DING ELEVATION INFORMATION (SURVEY	NOT REQUIRE	D) FOR ZONE AO AND ZO	Check here if attachme
	E), complete Items E1 through E4. If the Elevation			
ection C must be completed.			corol use as supporting into the	ICHIC A LOWN OF LOMR-F,
i. Building Diagram Number <u>I (</u> Sele	ect the building diagram most similar to the building fi	or which this certifi	cate is being completed – see pa	ges 6 and 7. If no diagram accurat
represents the building, provide a	sketch or photograph.)			•
	fing 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).	mainer (see need 7) the sent higher floor or alcumb	d floor (oloumian b	\aftha huilding in ∯(m) i	· /am/ abaya tha bishaat affayya
grade. Complete items C3.h and	penings (see page 7), the next higher floor or elevate I C3 i on front of form	e noor (elevanor) c	y or the building isit(in)i	i.(cm) above the nighest adjacent
•	oth number is available, is the top of the bottom floor	elevated in accord	ance with the community's floods	lain management ordinance?
	n. The local official must certify this information in Se			
(	SECTION F - PROPERTY OWNER (OR OW	NER'S REPRES	ENTATIVE) CERTIFICATIO	N
	orized representative who completes Sections A, B,	•	• • • • • • • • • • • • • • • • • • • •	rout a FEMA-issued or community
	here. The statements in Sections A, B, C, and E are	correct to the bes	t of my knowledge.	
	R'S AUTHORIZED REPRESENTATIVE'S NAME (1411, WESTLAKE COL	150167	.k ;==-°	
DDRESS	/A/ , Western care	СПҮ	STATE	ZIP CODE
	OIA PARKWAY, SUITE 150	77GA	ed OR	97224
IGNATURE /	Edi:	DATE 2////02	TELET \$72.3 (w)	HONE 94 0652
OMMENTS		7/		
,	OFOTION O COMMUNITY	VECOMATION	(007101111)	Check here if attachmer
11-#	SECTION G - COMMUNITY I	<del></del>	`	. A B C(D C Hi- D
local official who is authorized by la ificate. Complete the applicable ite	aw or ordinance to administer the community's flood	piain managemen	cordinance can complete Section	ns A, B, C (or E), and G or this Elev
	ras taken from other documentation that has been si	oned and emboss	ed by a licensed surveyor, encin	eer, or architect who is authorized
	vation information. (Indicate the source and date of t	₹		
A community official completed	d Section E for a building located in Zone A (without			AO.
			•	
	is G4-G9) is provided for community floodplain mana	agement purposes		
The following information (Items			6. DATE CERTIFICATE OF COMP	LIANCE/OCCUPANCY ISSUED
The following information (Item:	is G4-G9) is provided for community floodplain mana G5. DATE PERMIT ISSUED	G		LIANCE/OCCUPANCY ISSUED
The following information (Items I. PERMIT NUMBER  This permit has been issued for:	s G4-G9) is provided for community floodplain mana G5. DATE PERMIT ISSUED  New Construction  Substantial Improvement	G	6. DATE CERTIFICATE OF COMP	
The following information (Items I. PERMIT NUMBER  This permit has been issued for:	s G4-G9) is provided for community floodplain mana G5. DATE PERMIT ISSUED  New Construction Substantial Improvement cluding basement) of the building is:	G	6. DATE CERTIFICATE OF COMP fL(m)	LIANCE/OCCUPANCY ISSUED  Datum: Datum:
☐ The following information (Items PERMIT NUMBER  This permit has been issued for: ☐ Elevation of as-built lowest floor (inc  BFE or (in Zone AO) depth of floods	s G4-G9) is provided for community floodplain mana G5. DATE PERMIT ISSUED  New Construction Substantial Improvement cluding basement) of the building is:	G	6. DATE CERTIFICATE OF COMP	Datum:
The following information (Items PERMIT NUMBER This permit has been issued for: Elevation of as-built lowest floor (inc BFE or (in Zone AO) depth of floods CAL OFFICIAL'S NAME	s G4-G9) is provided for community floodplain mana G5. DATE PERMIT ISSUED  New Construction Substantial Improvement cluding basement) of the building is:	TITLE	6. DATE CERTIFICATE OF COMPI	Datum:
The following information (Items PERMIT NUMBER This permit has been issued for:  Elevation of as-built lowest floor (inc BFE or (in Zone AO) depth of floods CAL OFFICIAL'S NAME DMMUNITY NAME	s G4-G9) is provided for community floodplain mana G5. DATE PERMIT ISSUED  New Construction Substantial Improvement cluding basement) of the building is:	TELEF	6. DATE CERTIFICATE OF COMPI	Datum:
☐ The following information (Items PERMIT NUMBER This permit has been issued for: ☐ Elevation of as-built lowest floor (inc BFE or (in Zone AO) depth of floods CAL OFFICIAL'S NAME	s G4-G9) is provided for community floodplain mana G5. DATE PERMIT ISSUED  New Construction Substantial Improvement cluding basement) of the building is:	TITLE	6. DATE CERTIFICATE OF COMPI	Datum:

TTT TOUG FOITIONS

## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1 - 7.

O.M.B. No. 3067-0077 Expires July 31, 2002

	SECTION A - PROPERTY O	WNED INCOMATION	For Insurance Company Use:
DUIL DING OWNEDIS NAME	SECTION A - PROPERTY O	THE IN ORMATION	Policy Number
BUILDING OWNER'S NAME  Keizer Sand & Gravel Co.			CU89-98
BUILDING STREET ADDRESS (Including Apt.,	Unit. Suite, and/or Bldg. No.) OR P.O. ROUTE	AND BOX NO.	Company NAIC Number
1812 Willow Lake Rd			
CITY	STATE		ZIP CODE
Keizer	OR		97307
PROPERTY DESCRIPTION (Lot and Block Nur	mbers, Tax Parcel Number, Legal Description,	etc.)	
Tax Lot 100 Map 07-3W-04			
BUILDING USE (e.g., Residential, Non-resident	ial, Addition, Accessory, etc. Use Comments s	ection if necessary.)	
Equipment Maintenance Shop			
LATITUDE/LONGITUDE (OPTIONAL) (## - ##' - ##.##" or ##.####)	HORIZONTAL DATUM:	SOURCE: GPS (Type	
(## - ## - ##.## Or ##.####)	□ NAD 1927 □ NAD 1983	USGS Qua	ad Map  Other:
SE	CTION B - INSURANCE RATE MAP	(FIRM) INFORMATION	
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBE			B3. STATE
Marion County 410154	Marion County		OR
B4. MAP AND PANEL NUMBER B5. SUFFIX	B6. FIRM INDEX DATE B7. FIRM PANEL	B8. FLOOD ZONE(S)	B9. BASE FLOOD (Zone AO, use depth of flooding)
4404700400	EFFECTIVE/REVIS	`	(Zone AO, use depth of flooding)
41047C0193 G B10. Indicate the source of the Base	01/19/2000 01/19/2000 Flood Flovation (RFF) data or base f	AE	130.30
☐ FIS Profile ☐ FIRM	Community Determined		v
B11. Indicate the elevation datum use		• • • • • • • • • • • • • • • • • • • •	
B12. Is the building located in a Coas			
Designation Date:			,
	ON C - BUILDING ELEVATION INFO	RMATION (SURVEY REQUIR	RED)
C1. Building elevations are based on			
*A new Elevation Certificate will be re	equired when construction of the building i	s complete.	
C2. Building Diagram Number1 see instruction pages 6 and 7. If	_(Select the building diagram most in no diagram accurately represents the	similiar to the building for which e building, provide a sketch or	this certificate is being completed - photograph.)
C3. Elevations - Zones A1-A30, AE, A Complete Items C3a-i below according	ng to the building diagram specified in Iter	n C2. State the datum used. If the	datum is different from the datum
used for the BFE in Section B, conve	rt the datum to that used for the BFE. Sho nents area of Section D or Section G, as a	ow field measurements and datum	conversion calculation.
Datum Conversion/C		ppropriate, to document the datum	CONTROLSION.
	note	ce mark used appear on the FIRM	? 🗌 Yes 🛛 No
<del></del>		129.50 ft.(m)	
☑ a) Top of bottom floor (including b	pasement or enclosure)		License Number, Embossed Seal, Signature, and Date
□ b) Top of next higher floor	intural member (1/ zenes entr)	ft.(m) ft.(m)	
c) Bottom of lowest horizontal str	uctural member (v zones only)		
d) Attach garage (top of slab)	and/or aguinment consists the building	ft.(m) 131.40 ft.(m)	
•	and/or equipment servicing the building	131.40 ft.(m) 129.10 ft.(m)	
[X] f) Lowest adjacent grade (LAG)		129.50 ft.(m)	
[X] g) Highest adjacent grade (HAG)	ood vents) within 1 ft. above adjacent grad		
i) No. of permanent openings (fice its indicated in		e <u>10</u> sq. in. (sq. cm)	
, , , , , , , , , , , , , , , , , , ,			<b>N</b>
	ION D - SURVEYOR, ENGINEER, O		
This certification is to be signed and seale I certify that the information in Sections A, I understand that any false statement may	B, and C on this certificate represents my	y best efforts to interpret the data a	vailable.
CERTIFIER'S NAME		E NUMBER	
John P. Tacchini	226		
TITLE		NY NAME	
Survey Mgr Development Div	CITY	stlake Consultants STATE	ZIP CODE
15115 SW Sequoia Prkwy Ste 150	Tiga		97224
SIGNATURE	DATE 12/1	TELEPHON (503) 6	884-0652
	12/	1/2002 (503) 6	104-0032

IMPORTANT: In these spaces, o	copy the corresponding information fr	om 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 CU89-98
Willow Lake	STATE	ZIP CODE	CU89-98 Company NAIC Number
CITY	OR	97307	Company value value
Keizer	D - SURVEYOR, ENGINEER, OR ARC		(CONTINUED)
	Certificate for (1) community official, (2)		
COMMENTS			
B.11 Elevatoin benchmark: Mari	on County Vertical Control Station No. 1	244; Name: Willow; Elev.:	127.39 C.2 Structure
is wood frame slab on grade\ C	.3e Electrical outlet		
			☐ Check here if attachments
	ATION INFORMATION (SURVEY NOT		
information for a LOMA or LOMR-			
E1. Building Diagram Number - (Spages 6 and 7. If no diagram	Select the building diagram most similiar accurately represents the building, prov	to the building for which th ide a sketch or photograph	is certificate is being completed - see .)
the highest adjacent grade.	basement or enclosure) of the building		_lin.(cm) □ above or □ below
ft.(m)    in.	th openings (see page 7), the next highe .(cm) above the highest adjacent grade.	ą.	
E4. For Zone AO only: If no flood floodplain management ordin	depth number is available, is the top of ance? $\square$ Yes $\square$ No $\square$ Unknown.	he bottom floor elevated in The local official must certi	accordance with the community's fy this information in Section G.
SECTION	F - PROPERTY OWNER (OR OWNER	S REPRESENTATIVE) CE	RTIFICATION
The property owner or owner's au	thorized representative who completes	Section A, B, and E for Zon	e A (without FEMA -issued or
community-issued BFE) or Zone			
PROPERTY OWNER'S OR OWNER'S AU	THORIZED REPRESENTATIVE'S NAME		
ADDRESS	CITY		STATE ZIP CODE
SIGNATURE	DAȚE	TELI	EPHONE
COMMENTS			
			☐ Check here if attachments
	SECTION G - COMMUNITY INFO	ORMATION (OPTIONAL)	The state of the s
The local official who is authorized Sections A. B. C (or E), and G of	d by law or ordinance to administer the other this Elevation Certificate. Complete the	ommunity's floodplain mar	nagement ordinance can complete 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 elevation data in the Com	is authorized by state or local law to cer	tify elevation information. (	Indicate the source and date of the
Zone AO.	eleted Section E for a building located in		
	(Items G4-G9) is provided for community		
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF CO	OMPLIANCE/OCCUPANCY ISSUED
C7 This possit has been issued.	│ for:	ntial Improvement	
	oor (including basement) of the building i		ft.(m) Datum:
G9. BFE or (in Zone AO) depth of			ft.(m) Datum:
LOCAL OFFICIAL'S NAME	3	TITLE	
Les Sasaki		Principal Planner	
COMMUNITY NAME	·	TELEPHONE	
Marion County SIGNATURE		(503) 588-5038 DATE	
SIGNATURE		01/29/2003	
COMMENTS			
			☐ Check here if attachments

#### NATIONAL FLOOD INSURANCE PROGRAM

### **ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077 Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.

			A - PROPER	TY OWNER INFORMA	TION	For insurance Company Use:
BUILDING OWNER'S NA Keizer Sand &						Policy Number
BUILDING STREET ADD	RESS (Including	Apt., Unit, Suite, and/o	or Bldg. No.) (	OR P.O. ROUTE AND B	OX NO.	Company NAIC Number
СПҮ Keizer				STATE	ZIP (	CODE 97307
PROPERTY DESCRIPTION	ON (Lot and Block Map 07-3W	Numbers, Tax Parce	l Number, Le	gal Description, etc.)		
BUILDING USE (e.g., Res	idential, Non-resi	dential, Addition, Acce	ssory, etc. U	se a Comments area, if r	necessary.)	
LATITUDE/LONGITUDE (	OPTIONAL)	HORIZ	ONTAL DATI		OURCE: GPS (T	ype):Quad Map Other:
(## - ## - ##.## Of ##.						COURT.
		SECTION B - FLOOD			NFORMATION	
		<b>B</b> ER	B2. COUNTY N	IAME		B3:STATE
Marion Co. 410	0154		Marion			OR
R4 MAP AND PANEL	B5. SUFFIX	I		B7. FIRM PANEL		B9. BASE FLOOD ELEVATION(S)
NUMBER	50.00	B6. FIRM INDEX DATE	EFFE	CTIVE/REVISED DATE	B8. FLOOD ZONE(S)	(Zone AO, use depth of flooding)
41047C0193	G	1/19/2000			AE	130.5
			lood depth ent	ered in B9.		
					be):	
B11, Indicate the elevation date	um used for the BF	E in B9: 🔀 NGVD 192	9			
B12. Is the building located in a	Coastal Barrier Re	esources System (CBR:	S) area or Othe	rwise Protected Area (OP/	N? ☐ Yes KOKNO	Designation Date
	SEC	TION C - BUILDING	ELEVATION	INFORMATION (SUR	VEY REQUIRED)	
C1 Duilding alguetions can bee						
-		•				
					voing completed can r	sance 6 and 7. If no discrete
• •	<del>-</del> ·		to the bullding	TOT WITHCH BITS CERTIFICATE IS I	rand courbactor - see t	ages o and 1. In ho diagram
				D# 4D#E 4D#4 430 #	DALL ADVAC	
C3. Elevations – Zones A1-A30	), AE, AH, A (with E	3FE), VE, V1-V30, V (W	th BFE), AR, A	RIA, ARIAE, ARIAT-A3U, A	ARVAU	the state of the DCC in
Complete Items C3a-i be	low according to th	e building diagram spec	ified in Item C2	. State the datum used. If t	ne datum is different fro	om the datum used for the BFE in
Section B, convert the date	um to that used for	the BFE. Show field me	asurements an	id datum conversion calcul	ation. Use the space pr	ovided or the Comments area or
Section D or Section G, as	appropriate, to do	curnent the datum conve	ersion.			
					_	
Elevation reference mark to	usedDoes t	the elevation reference r	nark used app	ear on the FIRM? Yes	<b>&amp;</b> XNo	REGISTERED
a) Top of bottom floor (	including basemen	t or endosure)	12	29 .5_ft(m)	a j	PROFESSIONAL
• •	<del>-</del>		N,	<u>/Aft(m)</u>	Š	LAND, SURVEYOR
		ember (V zones only)	-		osse Date	
		7,			A D	
		autioment			m e	(Mart lachi
,	•	• •	13	31 4 <sub>fL(m)</sub>	ture /	OREGON
•		anno a caj	17		Num	JOHN P. TACCHINI
Rej zer		- 88 S	JAN. 15, 1987			
			_		Cen	2267
in ny ivo, or permanent op	enings (11000) vents	i) within 1 it above adjac	Barin (an an	er 1.A	<b>5</b>	RENEWAL: 6/30/09
U i) total area or air perm						
This certification is to be si	gned and sealed	by a land surveyor, er	ngineer, or arc	chitect authorized by law	to certify elevation in	formation.
I certify that the information	in Sections A, B	, and C on this certific	ate represent	s my best efforts to interp	oret the data available	9.
I understand that any false	statement may b	e punishable by fine o	r imprisonme	nt under 18 U.S. Code, S	Section 1001.	
					LICENSE NUMBER	
	11				1 2201	
TITLE Survey Manager	Dovolor	ont Division				T
	neverobile	eur DIAISION			<u>nsultants,</u> STATI	
ADDRESS 15115 SW Sequ	uoia Par	kway, Suite	e 150	Tigard	OR	_
SIGNATURE 2				DATE	TELE	PHONE
John T. lan	chi :	•		4/17/03	50	3-684-0652

	e spaces, copy the corresponding SS (Including Apt. Link Suits, and/or Bidg. No W Lake Road				
	w Lake Road	-,		Check here if attach  Check one) the highest adjacent grade. (U  Check here if attach  STATE  CATION  EA (without a FEMA-issued or communication  CATION  CATION	wite
an Keizer		STATE OR	97307		ny NAIC Number
	SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)  **SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)  **SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)  **MEMTS** 11 Blevation benchmark: Mario **Mario **				
	evation Certificate for (1) community offici	al, (2) insurance agent/company, a	nd (3) building owner.		
COMMENTS B.ll Elevat	ion benchmark: Ma	rio <b>∦</b> n Co. Verti	cal Control	Station	No. 1244
C.2 Structu	re is wood frame w	with slab on gr	ade	· · · · · · · · · · · · · · · · · · ·	
C.3e Electr	ical outlet	3 40 40 40 40 40 40 40 40 40 40 40 40 40			ack here if attachment
SECTION E	BUILDING ELEVATION INFORMA	ATION (SURVEY NOT REQUI	RED) FOR ZONE AO AN	D ZONE A (WIT)	HOUT BFE)
or Zone AO and Zone A (with action C must be completed. Building Diagram Number represents the building, plant and the top of the bottom floor natural grade, if available prade. Complete items Complete	ithout BFE), complete Items E1 through Bd.  d.  (Select the building diagram most simple as Authorized pasement or enclosure) of the color (including basement of form.  Sould epith number is available, is the top Inknown. The local official must certify the SECTION F - PROPERTY Or as authorized representative who completes authorized representative who completes is gin here. The statements in Sections (OWNER'S AUTHORIZED REPRESENT) in in in Westlake Or	E4. If the Elevation Certificate is into a large to the building for which this center building isft(m)in.(cm) [ If the building isft(m) [ If the building isft(m)	ended for use as supporting in ritificate is being completed – s above or below (checon b) of the building isft.(n ordance with the community's ESENTATIVE) CERTIFIC and C3.i only), and E for Zone est of my knowledge.	formation for a LOi see pages 6 and 7. k one) the highest n)in.(cm) above floodplain manage ATION A (without a FEMA	MA or LOMR-F,  If no diagram accurately adjacent grade. (Use the highest adjacent ement ordinance?  Sissued or community- 27P CODE 9 7 2 2 4
			·····	Chex	x here if attachments
	SECTION G	- COMMUNITY INFORMATIO	N (OPTIONAL)	<del></del>	
ificate. Complete the applic The information in Sect state or local law to ce A community official co The following information	cable item(s) and sign below. tion C was taken from other documentati rtify elevation information. (Indicate the s mpleted Section E for a building located i	on that has been signed and embo ource and date of the elevation da in Zone A (without a FEMA-issued	ssed by a licensed surveyor, a in the Comments area belo or community-issued BFE) or	engineer, or archik w.)	
PERMIT NUMBER	G5. DATE PERMIT ISSU	ED	G6. DATE CERTIFICATE OF C	COMPLIANCE/OCCL	JPANCY ISSUED
Bevation of as-built lowest t	d for: New Construction Substa floor (including basement) of the building of flooding at the building site is:		fL(m)		Datum: Datum:
CAL OFFICIAL'S NAME		TITL	E		
		TEL	EPHONE		
MMUNITY NAME					
MMUNITY NAME NATURE		DAT	Ė		
		DAT	Ė		

# FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

#### **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1 - 7.

O.M.B. No. 3067-0077 Expires July 31, 2002

				· · · · · · · · · · · · · · · · · · ·	
	SECTION A -	PROPERTY OWN	NER INFOR	MATION	For Insurance Company Use:
BUILDING OWNER'S NAME					Policy Number
Keier Sand & Gravel		VOD DO BOUTE AND	DOY NO		CU89-98
BUILDING STREET ADDRESS (Including Apt., Ur 1812 Willow Lake Rd		Company NAIC Number			
CITY		STATE		7	ZIP CODE
Keizer		OR OR			97307
PROPERTY DESCRIPTION (Lot and Block Numb Tax Lot 100 M 07-3W-04					
BUILDING USE (e.g., Residential, Non-residential Quarry Office	, Addition, Accessory, etc.	Use Comments section	on if necessary	<b>/.)</b>	
LATITUDE/LONGITUDE (OPTIONAL)	HORIZONTAL	L DATUM:	SOURC	CE: GPS (Type)	:
(##-##'-##.##" or ##.####)	☐ NAD 1927 ☐ I	NAD 1983		USGS Quad	d Map ☐ Other:
SECT	TION B - INSURANC		RM) INFOR		
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER		COUNTY NAME			B3. STATE
Marion County 410154	N	Marion			OR
B4. MAP AND PANEL NUMBER B5. SUFFIX	B6. FIRM INDEX DATE	B7. FIRM PANEL	, ,	B8. FLOOD ZONE(S)	B9. BASE FLOOD (Zone AO, use depth of flooding)
41047C0193 G	01/19/2000	effective/Revised D 01/19/2000	w i m	AE	130.50
41047C0193 G B10. Indicate the source of the Base Fl			d denth ente		100.00
☐ FIS Profile ☐ FIRM	☐ Community I	Determined	Other (D	escribe): MCPW	
B11. Indicate the elevation datum used					
B12. Is the building located in a Coasta	l Barrier Resources	System (CBRS) a	rea or Othe	rwise Protected A	rea (OPA)? ☐ Yes ☒ No
Designation Date:					
	N C - BUILDING ELI				
C1. Building elevations are based on: *A new Elevation Certificate will be requ	☐ Construction Drauired when construction	awings*   Building is co	ng Under Complete.	onstruction* 🛛 F	Finished Construction
C2. Building Diagram Number 6 see instruction pages 6 and 7. If n	(Select the building o diagram accurately	diagram most sim y represents the b	iliar to the building, prov	ouilding for which vide a sketch or p	this certificate is being completed - hotograph.)
C3. Elevations - Zones A1-A30, AE, AF Complete Items C3a-i below according used for the BFE in Section B, convert Use the space provided or the Commen Datum Conversion/Co	I, A (with BFE), VE, to the building diagram the datum to that used nts area of Section D o	V1-V30, V (with B n specified in Item C for the BFE. Show f	FE), AR, AF 2. State the d field measure	R/A, AR/AE, AR/A datum used. If the d ements and datum o	.1-A30, AR/AH, AR/AO. atum is different from the datum conversion calculation.
Elevation reference mark used <u>see no</u>		elevation reference i	mark used ap	ppear on the FIRM?	☐ Yes ☒ No
X a) Top of bottom floor (including bas	sement or enclosure)		129	9.50 ft.(m)	License Number, Embossed Seal,
[X] b) Top of next higher floor		_	132	2.40 ft.(m)	Signature, and Date
c) Bottom of lowest horizontal struct	tural member (V zones	only) _		ft.(m)	
d) Attach garage (top of slab)		_		ft.(m)	
Example 2     Example 3     Example 2     Example 3     Example 2     Example 3     Example 3     Example 3     Example 4     Example 3     Example 4     Example	nd/or equipment servici	ing the building _		9.50 ft.(m)	
X f) Lowest adjacent grade (LAG)		-		9.50 ft.(m)	
X g) Highest adjacent grade (HAG)		<u>.</u>		0.70 ft.(m)	
X h) No. of permanent openings (flood					
X i) Total area of all permanent openir				. (sq. cm)	
	ON D - SURVEYOR,				
This certification is to be signed and sealed I certify that the information in Sections A, B I understand that any false statement may b	, and C on this certifica	ate represents my be	est efforts to i	interpret the data av	ion information. vailable.
CERTIFIER'S NAME		LICENSE N			
John P. Tacchini		2267	MARKE		
Survey Manager Develop Div		COMPANY I Westla	NAME ke Consulta	ants	
ADDRESS		CITY	Contount	STATE	ZIP CODE
15115 SW Sequoia Pkwy Ste 150	<del></del>	Tigard		OR TELEPHONE	97224
SIGNATURE		DATE 12/11/2	2002	(503) 68	
			0.471.44.47		ACEC ALL PREVIOUS EDITIONS

IMPORTANT: In these space	es, copy the corresponding info	rmation from	Section A.	For Insu	rance Company Use:
BUILDING STREET ADDRESS (Inclu	uding Apt., Unit, Suite, and/or Bldg. No.) OR	P.O. ROUTE ANI	D BOX NO.	Policy Nu	
Willow Lake CITY	STA	ATE	ZIP CODE	CU89-	NAIC Number
Keizer		R	97307	Company	TO TO TOTAL
	TION D - SURVEYOR, ENGINEER			(CONTINUED	)
	ation Certificate for (1) community of				
COMMENTS					
B.11 Elevation benchmark:	Marion County Vertical Control Sta	tion No. 1244	; Name: Willow; Elev: '	127.39 NGVD	C.3e Water
and sewer service are at gro	ound level under structure. Structu	ire is a manuf	actured bldg on conc b	locks	
				☐ Chec	k here if attachments
SECTION E - BUILDING E	LEVATION INFORMATION (SUR	VEY NOT RE	QUIRED) FOR ZONE	O AND ZONE	A (WITHOUT BFE)
For Zone AO and Zone A (wi information for a LOMA or LO	thout BFE), complete Items E1 thro DMR-F, Section C must be complet	ough E4. If the	ne Elevation Certificate	is intended fo	r use as supporting
E1. Building Diagram Number pages 6 and 7. If no diag	er - (Select the building diagram mo gram accurately represents the buil	st similiar to t ding, provide	he building for which th a sketch or photograph	is certificate is )	s being completed - see
the highest adjacent grad					☐ above or ☐ below
ft.(m)	8 with openings (see page 7), the i in.(cm) above the highest adjace	ent grade.	*		
E4. For Zone AO only: If no fi floodplain management of	lood depth number is available, is t ordinance? □ Yes □ No □ U	the top of the l Inknown. The	bottom floor elevated ir local official must cert	n accordance v ify this informa	vith the community's tion in Section G.
	TION F - PROPERTY OWNER (OR				
The property owner or owner community-issued BFE) or Zo	's authorized representative who co one AO must sign here.	ompletes Sect	tion A, B, and E for Zor	ne A (without F	EMA -issued or
PROPERTY OWNER'S OR OWNER	'S AUTHORIZED REPRESENTATIVE'S NA	ME			
ADDRESS		CITY		STATE	ZIP CODE
SIGNATURE		DAŢE	TEL	EPHONE	
COMMENTS					
				☐ Chec	k here if attachments
	SECTION G - COMMU	NITY INFORM	MATION (OPTIONAL)	,	
The local official who is author Sections A, B, C (or E), and C	orized by law or ordinance to admir G of this Elevation Certificate. Com	ister the com	munity's floodplain mar	nagement ordii below.	nance can complete
engineer, or architect	ction C was taken from other docur who is authorized by state or local Comments area below.)	mentation that law to certify	thas been signed and elevation information. (	embossed by a Indicate the so	a licensed surveyor, ource and date of the
G2. A community official of Zone AO.	completed Section E for a building I	ocated in Zon	e A (without a FEMA-is	sued or comm	nunity-issued BFE) or
G3.   The following information of the follow	tion (Items G4-G9) is provided for o	community floo			
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		G6. DATE CERTIFICATE OF C	OMPLIANCE/OCCUP	ANCY ISSUED
G7. This pormit has been iss	ued for: New Construction	Substantial	Improvement		
	est floor (including basement) of the			ft.(m) Date	um:
	oth of flooding at the building site is				um:
LOCAL OFFICIAL'S NAME		TITL			
Les Sasaki			rincipal Planner		
COMMUNITY NAME Marion County			EPHONE 03) 588-5038		
SIGNATURE		DAT	E		
COMMENTO		01	1/29/2003		
COMMENTS	·				
				П с	l. bana if aller al
				□ Chec	k here if attachments

#### NATIONAL FLOOD INSURANCE PROGRAM

**ELEVATION CERTIFICATE** 

O.M.B. No. 3067-0077 Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.

important. Read the trist			<del></del>
SECTION A - PROPER	TY OWNER INFORMAT	TON	For Insurance Company Use:
BUILDING OWNER'S NAME Keizer Sand & Gravel			Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) C 1812 Willow Lake Road		X NO.	Company NAIC Number
CITY Keizer	STATE OR	ZIP CC 973	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Leg Tax Lot 100, Map 07-3W-04			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Us Quarry Office			
LATTTUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATU (##°-##'-####" or ##.#####") NAD 1927 NAD		DURCE: GPS (Typ USGS Q	
SECTION B - FLOOD INSURANCE	E RATE MAP (FIRM) IN	FORMATION	
B1, NFIP COMMUNITY NAME & COMMUNITY NUMBER B2, COUNTY N	AME	[ 6	33. STATE
Marion County - 410154 Marion	า		OR
B4, MAP AND PANEL B5, SUFFIX	87, FIRM PANEL		B9. BASE FLOOD ELEVATION(S)
NUMBER B6. FIRM INDEX DATE EFFE	CTIVE/REVISED DATE	B8. FLOOD ZONE(S)	(Zone AO, use depth of flooding)
41047C0193 G 1/19/2000		AE	130.5
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth enter	ered in B9.	. Marian (	County Dublic Wool
FIS Profile FIRM Community Determined			County Public Work
B11. Indicate the elevation datum used for the BFE in B9: A NGVD 1929		Other (Describe):	Posignation Data
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Other			vesignation vale
SECTION C - BUILDING ELEVATION			
<del></del>		Finished Construction	
*A new Elevation Certificate will be required when construction of the building is com			
C2. Building Diagram Number (Select the building diagram most similar to the building to	for which this certificate is be	eing completed - see pag	ges 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, AI	R/A, AR/AE, AR/A1-A30, AF	R/AH, AR/AO	
Complete Items C3a-i below according to the building diagram specified in Item C2.	. State the datum used. If the	e 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	d datum conversion calculat	ion. Use the space prov	rided or the Comments area of
Section D or Section G, as appropriate, to document the datum conversion.			
Datum Conversion/Comments			
Elevation reference mark usedDoes the elevation reference mark used appe	aron the FIRM? Yes	X №	REGISTERED
a) top of bottom file doing basement of endocated		ea j	PROFESSIONAL
☐ b) Top of next higher floor	32. 4t(m)	ossed Seal, Date	AND SURVEYOR
c) Bottom of lowest horizontal structural member (V zones only)	<u>/ A</u> ft.(m)	ossec Date	1112
☐ d) Attached garage (top of slab)	<u>/A</u> ft(m)	Embo	la P. Tacchir
e) Lowest elevation of machinery and/or equipment		ж. б. <b>11</b>	
	29. <u>5</u> ft(m)	a tu	OREGON IOUNI P TACCHINI
	29. 5 ft (m)	License Number, Signature,	JOHN P. TACCHINI JAN. 15, 1987
	30. 7 ft.(m)	ž.	2267
$\Box$ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade $^{F\dot{1}}$	ve	Z E	CHEVAL: 6/30/04
i) Total area of all permanent openings (flood vents) in C3.h(sq. in)(sq. cm	022		
SECTION D - SURVEYOR, ENGINE		RTIFICATION	•
This certification is to be signed and sealed by a land surveyor, engineer, or arc			rmation.
I certify that the information in Sections A, B, and C on this certificate represents I understand that any false statement may be punishable by fine or imprisonment	my best efforts to interpr	ret the data available.	
CERTIFIER'S NAME	1 dineer 10 0:0: 0000; 00	ICENSE NUMBER	
John P. Tacchini		OR 2267	
TILE	COMPANY NAME	3	
Survey Manager, Development Division	Westlake C		Inc.
ADDRESS	CITY	STATE	ZIP CODE
15115 SW Sequoia Parkway, Suite 150	Tigard	OR	97224
SIGNATURE /	DATE	TELEPH	
Worl laceling	4/17/03	(50.	3) 684-0652
<i>y</i>			

1017 552172 * ***	<b>copy the corresponding information (</b> Apt. Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE Road	EAND BOX NO.			Insurance Company I	lse:
CTY Lake	Road			Pok	cy Number	
Keizer		STATEOR	<b>2₽,000€</b> 97307		pany NAIC Number	
· SE	CTION D - SURVEYOR, ENGINEER, (	OR ARCHITECT CERT	FICATION (CONTI	VUED)		
Copy both sides of this Elevation Certific	cate for (1) community official, (2) insurance a	agent/company, and (3) but	lding owner.			
COMMENTS	nchmark: Marion Co.				1044	
Name: Willow, Elev		vertical C		acion i	NO. 1244	
C.3e water & sever	r service are at gr	lound bauni	undon obse			
	nufactured building			cture		
					heck here if attac	hmen
SECTION E - BUILDING	ELEVATION INFORMATION (SURVE	EY NOT REQUIRED) FO	OR ZONE AO AND	ZONE A M	THOLT DEE	
ror zone AO and zone A (without BFE), o Section C must be completed.	complete Items E1 through E4. If the Elevation	on Certificate is intended for	use as supporting info	rmation for a L	OMA or LOMR-F,	
E1. Building Diagram Number 6/Select the	e huilding discours most similar to the building	a facultish this as all and to				
represents the building, provide a sket	e building diagram most similar to the building	g for which this certificate is	being completed see	pages 6 and	<ol><li>If no diagram ac</li></ol>	xurate
2. The top of the bottom floor (including b	asement or enclosure) of the building is	ft.(m) in.(cm) $\square$ above	or Thelow/check/	nna) the bioba	et adiamet om de	<b>/</b> 1 (
natural grade, if available).	,		a Electrication	xicjuiciikgiica 	si aujaceni grace.	Use
3. For Building Diagrams 6-8 with opening	gs (see page 7), the next higher floor or eleva	ated floor (elevation b) of the	e building is 2 ft.(m)	[] in.(стт) abor	ve the highest adia	cent
grade. Complete items Com and Com	on front of form.				· -	
Yes \( \int \) No \( \int \) (Inknown The	mber is available, is the top of the bottom floo a local official must certify this information in S	or elevated in accordance w	ith the community's flo	odplain manaç	gement ordinance?	•
SECTION SECTIO	TION F - PROPERTY OWNER (OR OV	AMERIC DEPOSESSA	The opposit			
The property owner or owner's authorized	representative who completes Sections A. E.	C(tors C) band Cit	TIVE) CERTIFICA	ION		
issued BFE) or Zone AO must sign here.	representative who completes Sections A, E The statements in Sections A, B, C, and E a	o, C (REATES COLIN and COLIN are correct to the best of my	Ny), and E for Zone A ( Impulados	without a FEM	1/A-issued or comm	unity-
PROPERTY OWNER'S OR OWNER'S A	AUTHORIZED REPRESENTATIVE'S NAME	- Coulou by the best of thy	Nicwieuge.			
John P. Tacchini -	NUTHORIZED REPRESENTATIVES NAME - Westlake Consultar	nts				
ADDRESS 15115 SW Segucia P	Parkway, Suite 150	CITY.	SI	ATE	ZB CODE 4	
SIGNATURE / /	dirway, baile 150	Tigard		*****	9/224	
John 1-10	ellin'	4/17/0	)3	LEPHONE (	503) 684	1-06
COMMENTS						
				<u>П</u> ~	eck here if attach	
	SECTION G - COMMUNITY	INFORMATION (OPTIC	ONAL)		eck nere ir attach	ments
local official who is authorized by law or c	ordinance to administer the community's floor	driain management orfine	ON CON CONTRICTO CON	A D C /-		<b>—</b>
rificate. Complete the applicable item(s) a	and sign below.	opan na logana il uturia	nce can complete sec	BOTES A, B, C (C	or E), and G or this	Devan
	en from other decrimentation that has been			ineer, or archi	ited who is authori:	red by
L_I The information in Section C was take	anion one occumentation indities been	signed and embossed by a	icensed surveyor, end			
The information in Section C was take state or local law to certify elevation in	information. (Indicate the source and date of	the elevation data in the Co	omments area helow \			
A community official completed Section	information. (Indicate the source and date of on E for a building located in Zone A (without	the elevation data in the Co t a FEMA-issued or commu	omments area helow \			
A community official completed Section  The following information (Items G4-G	nnormation. (Indicate the source and date of on E for a building located in Zone A (without G9) is provided for community floodplain man	the elevation data in the Co t a FEMA-issued or commu	omments area helow \			
A community official completed Section	information. (Indicate the source and date of on E for a building located in Zone A (without	the elevation data in the Co t a FEMA-issued or commu nagement purposes.	omments area helow \	ne AO.		
Sale of local law to definy elevation in  A community official completed Section  The following information (Items G4-G	information. (Indicate the source and date of on E for a building located in Zone A (without G9) is provided for community floodplain man	the elevation data in the Co t a FEMA-issued or commu nagement purposes.  G6. DATE	omments area below.) inity-issued BFE) or Zo	ne AO.		
A community official completed Section  A community official completed Section  The following information (Items G4-C)  PERMIT NUMBER  This permit has been issued for: New	information. (Indicate the source and date of on E for a building located in Zone A (without G9) is provided for community floodplain man  G5. DATE PERMIT ISSUED  Construction.   Substantial Improvement	the elevation data in the Co t a FEMA-issued or commu nagement purposes.  G6. DATE	omments area below.) nity-issued BFE) or Zo	ne AO.	ZUPANCY ISSUED	
A community official completed Section  A community official completed Section  The following information (Items G4-C)  PERMIT NUMBER  This permit has been issued for: New Elevation of as-built lowest floor (Including	information. (Indicate the source and date of on E for a building located in Zone A (without G9) is provided for community floodplain man G5. DATE PERMIT ISSUED  Construction Substantial Improvement basement) of the building is:	the elevation data in the Co t a FEMA-issued or commu nagement purposes.  G6. DATE	omments area below.) nity-issued BFE) or Zo CERTIFICATE OF COM	ne AO.	CUPANCY ISSUED  Datum:	
A community official completed Section  A community official completed Section  The following information (Items G4-C)  PERMIT NUMBER  This permit has been issued for: New	information. (Indicate the source and date of on E for a building located in Zone A (without G9) is provided for community floodplain man G5. DATE PERMIT ISSUED  Construction Substantial Improvement basement) of the building is:	the elevation data in the Co t a FEMA-issued or commu nagement purposes.  G6. DATE	omments area below.) nity-issued BFE) or Zo	ne AO.	ZUPANCY ISSUED	
A community official completed Section  A community official completed Section  The following information (Items G4-C4)  PERMIT NUMBER  This permit has been issued for: New Elevation of as-built lowest floor (including BFE or (in Zone AO) depth of flooding at the CAL OFFICIAL'S NAME	information. (Indicate the source and date of on E for a building located in Zone A (without G9) is provided for community floodplain man G5. DATE PERMIT ISSUED  Construction Substantial Improvement basement) of the building is:	the elevation data in the Cotta FEMA-issued or communagement purposes.  G6. DATE	omments area below.) nity-issued BFE) or Zo CERTIFICATE OF COM	ne AO.	CUPANCY ISSUED  Datum:	
A community official completed Section A community official completed Section The following information (Items G4-C4-C4-C4-C4-C4-C4-C4-C4-C4-C4-C4-C4-C4	information. (Indicate the source and date of on E for a building located in Zone A (without G9) is provided for community floodplain man G5. DATE PERMIT ISSUED  Construction Substantial Improvement basement) of the building is:	the elevation data in the Co t a FEMA-issued or commu nagement purposes.  G6. DATE	omments area below.) nity-issued BFE) or Zo CERTIFICATE OF COM	ne AO.	CUPANCY ISSUED  Datum:	
A community official completed Section  A community official completed Section  The following information (Items G4-C4)  PERMIT NUMBER  This permit has been issued for: New Elevation of as-built lowest floor (including BFE or (in Zone AO) depth of flooding at the CAL OFFICIAL'S NAME	information. (Indicate the source and date of on E for a building located in Zone A (without G9) is provided for community floodplain man G5. DATE PERMIT ISSUED  Construction Substantial Improvement basement) of the building is:	the elevation data in the Cotta FEMA-issued or communagement purposes.  G6. DATE	omments area below.) nity-issued BFE) or Zo CERTIFICATE OF COM	ne AO.	CUPANCY ISSUED  Datum:	
A community official completed Section A community official completed Section The following information (Items G4-C4-C4-C4-C4-C4-C4-C4-C4-C4-C4-C4-C4-C4	information. (Indicate the source and date of on E for a building located in Zone A (without G9) is provided for community floodplain man G5. DATE PERMIT ISSUED  Construction Substantial Improvement basement) of the building is:	the elevation data in the Cotta FEMA-issued or communagement purposes.  G6. DATE  TITLE  TELEPHONE	omments area below.) nity-issued BFE) or Zo CERTIFICATE OF COM	ne AO.	CUPANCY ISSUED  Datum:	
A community official completed Section  A community official completed Section  The following information (Items G4-G1)  PERMIT NUMBER  This permit has been issued for:  New Elevation of as-built lowest floor (including BFE or (in Zone AO) depth of flooding at the CAL OFFICIAL'S NAME  MMUNITY NAME  SNATURE	information. (Indicate the source and date of on E for a building located in Zone A (without G9) is provided for community floodplain man G5. DATE PERMIT ISSUED  Construction Substantial Improvement basement) of the building is:	the elevation data in the Cotta FEMA-issued or communagement purposes.  G6. DATE  TITLE  TELEPHONE	omments area below.) nity-issued BFE) or Zo CERTIFICATE OF COM	ne AO.	CUPANCY ISSUED  Datum:	