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 OWNE	PINEO	MATION	
BUILDING OWNER'S NAME			THE DATE OF THE	it iiii Oi	MATION	For Insurance Company Use:
City of Salem Genera				Policy Number		
BUILDING STREET ADDRE	o.) OR P.O. ROUTE AND E	BOX NO	***	FP04-17		
2700 Santiam St E						Company NAIC Number
CITY			STATE			ZIP CODE
Stayton	OR			97383		
PROPERTY DESCRIPTION	(Lot and Block Num	bers, Tax Parcel Number,	Legal Description, etc.)			
Tax lot 091W13 0040	•					
BUILDING USE (e.g., Reside	ential, Non-residentia	al, Addition, Accessory, etc.	. Use Comments section	if necessary	(.)	
Generator shed, indu						
LATITUDE/LONGITUDE ((## - ##' - ##.##" or ##.###	(OPTIONAL)	HORIZONTA	L DATUM:	SOURC	E: GPS (Type):
(OI	, , ,	□ NAD 1927 □	NAD 1983			d Map Other:
	SEC.	TION D. INCLIDAN	OF DATE MAD (TIME			o wap
B1. NFIP COMMUNITY NAME & C	OLC SECULIA SE		E RATE MAP (FIRM	i) INFOR	MATION	
Stayton 410154	OMMONITY NUMBER		COUNTY NAME		-	B3. STATE
B4. MAP AND PANEL NUMBER	B5. SUFFIX	B6. FIRM INDEX DATE	Marion County			OR
	30.007112	BO. FIRM INDEX DATE	B7. FIRM PANEL EFFECTIVE/REVISED DATE		B8. FLOOD ZONE(S)	B9. BASE FLOOD
4101360050	В	9/29/1986	9/29/1986		· A.F.	(Zone AO, use depth of flooding)
B10. Indicate the source	e of the Base FI	and Flevation (REE)	data or bose floor d		A5	478
☐ FIS Profile	☑ FIRM	Community	Determined	Othor (D	rea in 89.	
B11. Indicate the elevat		for the BFF in B9	X NGVD 1929	MAND 40	escribe):	
B12. Is the building loca	ated in a Coasta	Rarrier Resources	System (CBBS) area	NAVU IS	Other (Describe): .rea (OPA)? □ Yes ☒ No
Designation Date:	arou mi a obabia	Darrier Mesources	oystem (CBRS) area	or Otner	wise Protected A	rea (OPA)? ☐ Yes ☒ No
		10 500 500 500		-		
O4 B '11'	3501101	A C - BUILDING ELI	EVATION INFORMA	TION (SU	RVEY REQUIRE	ĒD)
C1. Building elevations	are based on:	☐ Construction Dra	awings* 🗌 Building l	Jnder Co	nstruction* 🛛 F	inished Construction
Titlett Elevation Gen	meate will be redu	area when construction	of the building is comp	lete.		
C2. Building Diagram N	umber 1	(Select the building	diagram most similiar	to the bu	ilding for which	this certificate is being completed
and monaction page	co o and 7. If the	o diagram accurately	represents the build	ing, provi	de a sketch or ol	hotograph)
C3. Elevations - Zones /	A1-A30, AE, AH	. A (with BFE), VF. \	/1-V30 V (with REE)	AR AR	A ADIAE ADIA	1 A20 AD/ALL AD/A0
Complete Rolling Cod-1	DOIOW ACCORDING	to the bilitoina diaaram	Shecitied in Itam (**) St	1010 tha da	المستحددة والمستحددة	
	SCHOILD, CONVENT	ne ualum to mat used	INF THE KILL SHOW HAID	MAGGILIFAN		
ode the space provide	Conversion/Cor	its area or Section D of	Section G, as appropri	ate, to doc	ument the datum of	conversion.
Elevation reference ma	_ Conversion/Con ark used RM181		Januaria			
			levation reference mark	used app	ear on the FIRM?	X Yes 🗌 No
[X] a) Top of bottom floor (including basement or enclosure)				479.	50 ft.(m)	License Number, Embossed Seal,
[X] b) Top of next higher floor				479.	50 ft.(m)	Signature, and Date
[X] c) Bottom of lowest horizontal structural member (V zones only)					00 ft.(m)	
[X] d) Attach garage (top of slab)					00 ft.(m)	
[X] e) Lowest elevation of machinery and/or equipment servicing the building				0.	00 ft.(m)	
X f) Lowest adjacent grade (LAG)					03 ft.(m)	
[X] g) Highest adjacent grade (HAG)					48 ft.(m)	
h) No. of permanen	t openings (flood	vents) within 1 ft. above	e adjacent grade 0		<u></u> 11.(111)	
i) Total area of all p	ermanent opening	as (flood vents) in C3hi)	sq. in. (
-	SECTION	ND-SURVEYOR, E	NGINEER, OR ARC	HITECT (CERTIFICATION	
This certification is to be sig	ned and sealed b	y a land surveyor, engi	neer, or architect author	ized by lav	v to certify elevation	n information.
i cerary triat trie irriorritation	III Sections A. B	and C on this certificati	e renresents my host of	forte to into	emrat tha data acce	ilable.
I understand that any false s	statement may be	puriishable by tine or i			Section 1001.	
Troy Thomson			LICENSE NUMBER 73415	1		
TITLE			COMPANY NAME			
Project Manager			City of Sale	m		
ADDRESS 1410 20th St SE, Bldg 2)		CITY	······································	STATE	ZIP CODE
SIGNATURE			Salem		OR	97302
			DATE 7/14/2004		TELEPHONE (503) 590	2101
FEMA Form 81-31, AUG	99	SEE DEVEDO	PE SIDE FOR CONTI		(503) 589	-2101

IMFORTANT: In these space	For Insurance Company Use:						
	G STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.				Policy Number		
Santiam CITY		STATE	712.0025	FP04-17			
Stayton		OR	ZIP CODE 97383	Company N	IAIC Number		
	ON D - SURVEYOR, ENGINE			(CONTINUED)			
Copy both sides of this Elevati				<u> </u>			
COMMENTS	on Cermicate for (1) community	y Official, (2) III	surance ageni/company	r, and (3) building	j owner.		
	•			☐ Check	here if attachments		
SECTION E - BUILDING EL	EVATION INFORMATION (SU	JRVEY NOT RI	EQUIRED) FOR ZONE	AO AND ZONE	(WITHOUT BFE)		
For Zone AO and Zone A (with information for a LOMA or LOM	out BFE), complete Items E1 t	hrough E4. If					
E1. Building Diagram Number pages 6 and 7. If no diagram	- (Select the building diagram i am accurately represents the b	most similiar to uilding, provide	the building for which the a sketch or photograph	nis certificate is b	eing completed - see		
E2. The top of the floor (includi the highest adjacent grade	ng basement or enclosure) of			· ·	above or		
E3. For Building Diagrams 6-8	with openings (see page 7), th in.(cm) above the highest adja	e next higher fl acent grade.	oor or elevated floor (ele	evation b) of the	building is		
E4. For Zone AO only: If no floo floodplain management or	od depth number is available, i dinance? □ Yes □ No □	is the top of the Unknown. Th	bottom floor elevated in e local official must cert	n accordance with	h the community's		
	ON F - PROPERTY OWNER (C						
The property owner or owner's	authorized representative who	completes Se	ction A, B, and E for Zor	ne A (without FEI	MA -issued or		
community-issued BFE) or Zon	e AO must sign here.	·		·			
PROPERTY OWNER'S OR OWNER'S	AUTHORIZED REPRESENTATIVE'S I	NAME			years and the second se		
ADDRESS		CITY		STATE	ZIP CODE		
SIGNATURE		DATE	TEL	EPHONE			
COMMENTS							
				□ Check	here if attachments		
	SECTION G - COMM	UNITY INFOR	MATION (OPTIONAL)		Total il attachimento		
The local official who is authorize Sections A, B, C (or E), and G	ed by law or ordinance to adn	ninister the com	nmunity's floodplain mar	nagement ordinar	nce can complete		
G1. The information in Section					censed surveyor.		
engineer, or architect whe elevation data in the Co	no is authorized by state or loc	al law to certify	elevation information. (Indicate the sour	ce and date of the		
G2. A community official con Zone AO.	npleted Section E for a building	g located in Zor	ne A (without a FEMA-is	sued or commun	nity-issued BFE) or		
G3. The following information	n (Items G4-G9) is provided fo	r community flo	odplain management p	urposes.			
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		G6. DATE CERTIFICATE OF CO	OMPLIANCE/OCCUPANO	CY ISSUED		
G7. This permit has been issue	d for: Now Construction	☐ Substantia	Improvement				
G8. Elevation of as-built lowest		□ Substantia	·	ft (m) Datum			
G9. BFE or (in Zone AO) depth				ft.(m)			
LOCAL OFFICIAL'S NAME	or nooding at the building site						
Les Sasaki		TIT! P	rincipal Planner				
COMMUNITY NAME		TEL	EPHONE				
Marion County SIGNATURE		(<u>{</u> DA1	503) 588-5038				
			/9/2005				
COMMENTS				***************************************	10		
	47-1						
				☐ Check h	nere if attachments		

FEDERAL EMERGENCY MANAGEMENT AGENCY TIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires December 31, 2005

		Important: Rea	ad the instructions on pages '	1 - 7.	1709/1	
		SECTION A -	PROPERTY OWNER INFORM	MATION	For Insurance Company Use:	
BUILDING OWNER'S NA	ME				Policy Number	
City of Salem						
BUILDING STREET ADD 2700 E. Santiam Street	Company NAIC Number					
CITY Statyon					DE	
			umber, Legal Description, etc.)			
BUILDING USE (e.g., Res	sidential, Non-resid	lential, Addition, Accesso	ory, etc. Use a Comments area,	if necessary.)		
Generator Shed, Industria LATITUDE/LONGITUDE			TAL DATUM:	SOURCE: GPS (Type	2).	
(##°-##'-##.##" or ##			☑ NAD 1983	USGS Qu		
	S	ECTION B - FLOOD IN	SURANCE RATE MAP (FIRM)	INFORMATION		
B1. NFIP COMMUNITY NAME Stayton, OR, 410170	& COMMUNITY NUM		COUNTY NAME	ľ	3. STATE regon	
			•			
B4. MAP AND PANEL NUMBER 4101360050	B5. SUFFIX B	B6. FIRM INDEX DATE 9/29/86	B7. FIRM PANEL EFFECTIVE/REVISED DATE 9/29/86	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 478	
B10. Indicate the source of the				ocapo).		
FIS Profile B11. Indicate the elevation dat	☑ FIRM	Community Determ		8 Dother (Describe):		
B11. Indicate the elevation dat	um used for the Bri	= IN DB: [X] INGVD 1929	rea or Otherwise Protected Area (O		Decignation Date	
B12. Is the building located in a			EVATION INFORMATION (SU		Designation Date	
						
C1. Building elevations are bas			-	☐ Finished Construction		
		hen construction of the buil				
C2. Building Diagram Number	$\underline{1}$ (Select the buildin	g diagram most similar to tl	ne building for which this certificate i	s being completed - see page	es 6 and 7. If no diagram	
accurately represents the						
			FE), AR, AR/A, AR/AE, AR/A1-A30			
Complete Items C3a-i be	elow according to the	e building diagram specified	in Item C2. State the datum used.	If the datum is different from t	he datum used for the BFE in	
Section B, convert the dat	um to that used for t	he BFE. Show field measu	rements and datum conversion calc	culation. Use the space provid	ded or the Comments area of	
Section D or Section G, as	appropriate, to doc	ument the datum conversion	on.			
Datum RM181 (459.86)	Conversion/Comme	nts				
Elevation reference mark	used <u>RM181</u> Does t	he elevation reference mar	k used appear on the FIRM? 🔲 \	Yes □ No □	SED PROCE	
o a) Top of bottom floor (i			<u>479</u> . <u>50</u> ft.(m)	Seal,	CIENCESCO	
o b) Top of next higher flo	-	•	479 . 50 ft.(m)	νς Vo	ENGINEES	
o c) Bottom of lowest horizontal structural member (V zones only)			<u>0.00</u> ft.(m)	ossed Date	73415/	
o d) Attached garage (top		, ,,	<u>0</u> . <u>00 ft.(m)</u>	Embosse		
o e) Lowest elevation of r		uipment	,	ш г о	son flum	
,	g (Describe in a Co	•	<u>0</u> . <u>00 f</u> t.(m)	nbe.	OREGON /	
o f) Lowest adjacent (finis	• ,	THITION CO. CO.	479 . 03 ft.(m)	ž igi 🖊	XU, (14/0 (5/2)	
o g) Highest adjacent (fini			479. 48 ft.(m)	License Number, Signature,	0 THOMS	
		within 1 ft. above adjacent		jo	O. THOM	
				- L	Frps 6/30/06	
o i) Total area of all permanent openings (flood vents) in C3.h 0 sq. in. (sq. cm) SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION						
This certification is to be s	igned and sealed t	by a land surveyor, engin	eer, or architect authorized by la	w to certify elevation inform	nation.	
			represents my best efforts to into			
		e punisnable by tine or in	nprisonment under 18 U.S. Code	LICENSE NUMBER 7341	F	
CERTIFIER'S NAME Troy T	nomson			LICENSE NUMBER / 341	3	
TITLEProject Manager			COMPANY NAME	City of Salem		
ADDDECC			CITY	STATE	ZIP CODE	
ADDRESS	4		CITY Salem	OR STATE	97302	
1410 20th Street SE, Bldg 2 SIGNAFURE	<i>-{}</i>		DATE	TELEPHO		
I was the	man		7/14/04	503-589-2		

IMPORTANT: In these spaces, copy the corres	pon ing information from	Section A.			nsurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/	or Bko.) OR P.O. ROUTE AN	BOX NO.		Polic	y Number
2700 E. Santiam Street	CT	ATE	ZIP CODE	Corr	pany NAIC Number
CITY Stayton	OR		97383	00.1	pany to the Hamber
SECTION D - SUR	VEYOR, ENGINEER, OR	ARCHITECT (ERTIFICATION (CONT	TINUED)	
Copy both sides of this Elevation Certificate for (1) commi	unity official, (2) insurance ager	nt/company, and	(3) building owner.		
COMMENTS					
				П	Check here if attachments
SECTION E - BUILDING ELEVATION	INFORMATION (SURVEY	NOT REQUIR	ED) FOR ZONE AO AN	ID ZONE A (W	THOUT BFE)
or Zone AO and Zone A (without BFE), complete Items E	1 through E4. If the Elevation (Certificate is inter	ided for use as supporting i	nformation for a l	_OMA or LOMR-F,
ection C must be completed.					
1. Building Diagram Number _(Select the building diagram		or which this certi	ficate is being completed -	see pages 6 and	17. If no diagram accurately
represents the building, provide a sketch or photograph	h.)		luturu 🗖 kalani (aka	al. a.a.) tha highs	ent adiacent arado. (Uso
2. The top of the bottom floor (including basement or end	osure) of the building is ft.i	m)in.(cm) [above or Libelow (che	ck one) the night	ist adjacent grade. (Ose
natural grade, if available). 3. For Building Diagrams 6-8 with openings (see page 7),	the next higher floor or elevate	d floor (elevation	b) of the building is ft.(m) in.(cm) abo	ove the highest adjacent
grade. Complete items C3.h and C3.i on front of form.		a noor (clovation	D) 0, 0, 0, 0 Daneg	,	,
4. The top of the platform of machinery and/or equipment	servicing the building isft.	(m)in.(cm) [_	above or 🔲 below (che	ck one) the highe	st adjacent grade. (Use
natural grade, if available).					
5. For Zone AO only: If no flood depth number is available	e, is the top of the bottom floor	elevated in acco	rdance with the community	's floodplain man	agement ordinance?
Yes No Unknown. The local official mu	ust certify this information in Se	CTION G.	CENTATIVE CERTIE	CATION	
SECTION F - PRO	PERTY OWNER (OR OW	C/Homo C2 h or	od C3 i only) and E for Zon	ο Δ (without a FF	MA issued or community-
The property owner or owner's authorized representative issued BFE) or Zone AO must sign here. The statements	who completes Sections A, B, s in Sections A, B, C, and E are	correct to the b	ng C3.1 only), and £ 101 2011 est of my knowledge.	e v (Minioria) r	HATH-1920CO OF CONTINUENCY
PROPERTY OWNER'S OR OWNER'S AUTHORIZED I					
Sophia Hobet	MENESENTATIVE STAME				
ADDRESS)	1	CITY		STATE	ZIP CODE 97302
1410 20th Street SE, Bldg 2	/ 	Salem DATE	2/11/2/	OR TELEPHONE	97302
SIGNATURE /V//>	10 AN	C	1/14/2004	(503) 588-6063	
COMMENTS /					
					Check here if attachments
2	ECTION G - COMMUNITY	INFORMATIO	N (OPTIONAL)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
he local official who is authorized by law or ordinance to a				e Sections A. B. (C (or E), and G of this Elevation
ne local official who is authorized by law of ordinal ice to a certificate. Complete the applicable item(s) and sign below		apiain managom	On Orania iso san san pro-	,	, ,
31. The information in Section C was taken from other	documentation that has been	signed and embo	ossed by a licensed survey	or, engineer, or a	rchitect who is authorized by
or local law to certify elevation information. (Indica	ate the source and date of the e	elevation data in 1	he Comments area below.)	
62. A community official completed Section E for a bui	Iding located in Zone A (withou	t a FEMA-issued	or community-issued BFE) or Zone AO.	
63. The following information (Items G4-G9) is provide		nagement purpo			
G4. PERMIT NUMBER G5. DATE	PERMIT ISSUED		G6. DATE CERTIFICATE C	OF COMPLIANCE/	OCCUPANCY ISSUED
	- C. hatantial Improvemen				
G7. This permit has been issued for: New Construction G8. Elevation of as-built lowest floor (including basement) of	of the building is:	Ц	ft.(m)		Datum:
59. BFE or (in Zone AO) depth of flooding at the building s			ft.(m)	Datum:
		ŢĨŢ	IF.		
LOCAL OFFICIAL'S NAME					
COMMUNITY NAME		TE	LEPHONE		
SIGNATURE		DA	TE		
COMMENTS					
CONTRACTO					
					Check here if attachments