U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-9009-Expiration Date: When bei 30, 2022

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

OCT 27 2021

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and FOR INSURANCE COMPANY SECTION A - PROPERTY INFORMATION Policy Number: A1. Building Owner's Name DAVID WOMACK A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: Box No. 17204 HARRIS LN SE ZIP Code State City 97352 Oregon **JEFFERSON** A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 1, MCCOYS GARDEN TRACTS A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) NON-RESIDENTIAL A5. Latitude/Longitude: Lat. 44.70564 Long. 123.00478 Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) 1575.00 sq ft b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 0 c) Total net area of flood openings in A8.b d) Engineered flood openings? ☐ Yes ☒ No A9. For a building with an attached garage: N/A sqft a) Square footage of attached garage b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A N/A sq in c) Total net area of flood openings in A9.b d) Engineered flood openings? ☐ Yes ☒ No SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3. State **B1. NFIP Community Name & Community Number B2. County Name** Oregon MARION MARION COUNTY 410154 B9. Base Flood Elevation(s)
(Zone AO, use Base Flood Depth) B7. FIRM Panel B8. Flood B5. Suffix B6, FIRM Index B4. Map/Panel Effective/ Zone(s) Number Date **Revised Date** ΑE 229.5 01-19-2000 10-18-2019 41047C1000 G B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: 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 ☐ CBRS ☐ OPA Designation Date:

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

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. 17204 HARRIS LN SE				Policy Number:		
City State ZIP Code UEFFERSON Oregon 97352			Company NAIC Number			
SECTION C – BUILDIN	G ELEVATION IN	ORMATION (SURVEY I	REQUIRE	D)		
C1. Building elevations are based on: Cons *A new Elevation Certificate will be required w C2. Elevations – Zones A1–A30, AE, AH, A (with Complete Items C2.a–h below according to the Benchmark Utilized: GPS SURVEY	BFE), VE, V1–V30, \ e building diagram s	the building is complete. V (with BFE), AR, AR/A, A	R/AE, AR/	'A1-A30, A	ed Construction R/AH, AR/AO. neters.	
Indicate elevation datum used for the elevation	ns in items a) throug	h h) below.				
□ NGVD 1929 □ NAVD 1988 □ C □ Datum used for building elevations must be the	Other/Source:		Che	ack the me	asurement used.	
a) Top of bottom floor (including basement, c	rawispace, or enclos	sure floor)	231.5	⊠ feet	meters	
b) Top of the next higher floor			N/A	⋉ feet	meters	
c) Bottom of the lowest horizontal structural member (V Zones only)			N/A	☐ feet	meters meters	
d) Attached garage (top of slab)			N/A	☐ feet	meters	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)			234.7	⊠ feet	meters	
f) Lowest adjacent (finished) grade next to building (LAG)			231.0	★ feet	meters	
			231.4		meters meters	
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support			N/A	⊠ feet	meters	
	EYOR, ENGINEER	, OR ARCHITECT CERT	IFICATIO	N		
This certification is to be signed and sealed by a l I certify that the information on this Certificate rep statement may be punishable by fine or imprison	nent under 18 U.S. (Code, Section 1001.	anabio, i a	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Were latitude and longitude in Section A provided	by a licensed land	surveyor? ⊠Yes □N	o <u> </u>	Check nei	re if attachments.	
Certifier's Name TROY PETERSEN	License Nu PLS 61408			PROFE	STERED SSIONAL SURVEYOR	
Title PROFESSIONAL LAND SURVEYOR				Toy ?	retur	
Company Name LAND MARKERS SURVEYING				JANUA	EGON RY 10, 2006 PETERSEN	
Address 4068 HUDSON AVE NE				6	1.408 2-31-22	
City SALEM	State Oregon	ZIP Code 97301	EX	pires .10	<u> </u>	
Signature Petro	Date 10-08-202	• •			(0) 1 . !! !!	
Copy all pages of this Elevation Certificate and all a Comments (including type of equipment and local	tion, per C2(e), if ap	plicable)				
ELECTRICAL METER SHOWN ON C2(E). NGS	NCAT WAS USED	TO CONVERT NAVD88 IN	NTO NGVI	J29 DATU	vi.	