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

	For Insurance Company Use:			
BUILDING OWNER'S NAME	Policy Number			
Robert Meyer (2)	FP02-5			
BUILDING STREET ADDRESS (Including A	pt., Unit, Suite, and/or Bldg. No	.) OR P.O. ROUTE AND E	BOX NO.	Company NAIC Number
6805 River Rd		OTATE		ZIP CODE
CITY		STATE OR		97302
Salem	Numbers Tay Parcel Number	-		
PROPERTY DESCRIPTION (Lot and Block	Numbers, rax Parcei Number,	Legal Description, etc.)		
BUILDING USE (e.g., Residential, Non-resid	dential, Addition, Accessory, etc	: Use Comments section	if necessary.)	
LATITUDE/LONGITUDE (OPTIONAL)	9):			
(## - ##' - ##.##" or ##.####)	NAD 1927 □	NAD 1983	ad Map Other:	
44-51'-12.8				
	SECTION B - INSURANCE		WI) INFORMATION	B3. STATE
B1. NFIP COMMUNITY NAME & COMMUNITY NUI		2. COUNTY NAME Marion County		OR
Marion County 410154 B4, MAP AND PANEL NUMBER B5, SUFFIX	B6, FIRM INDEX DATE	B7. FIRM PANEL	B8. FLOOD ZONE(S)	B9. BASE FLOOD
84. MAP AND PANEL NUMBER 85. SUFFIX	DO. FIRM INDEX DATE	EFFECTIVE/REVISED DA		(Zone AO, use depth of flooding)
40147C0650 G	01/19/2000	01/19/2000	Α	
B10. Indicate the source of the Ba	se Flood Elevation (BFE) data or base flood	depth entered in B9.	
☐ FIS Profile ☐ FIRM	☐ Community	Determined 2	(Describe): see o	
B11. Indicate the elevation datum	used for the BFE in B9:	⊔ NGVD 1929 □	NAVD 1988 LJ Other	(Describe):
B12. Is the building located in a Co	pastal Barrier Resources	s System (CBRS) are	ea or Otherwise Protected	Area (UPA)? Li tes Li No
Designation Date:				
			ATION (SURVEY REQUI	
C1. Building elevations are based *A new Elevation Certificate will b	e required when construction	on of the building is cor	nplete.	h this certificate is being completed
C2. Building Diagram Numbersee instruction pages 6 and 7C3. Elevations - Zones A1-A30, A	 If no diagram accurate 	ely represents the bu	ilding, provide a sketch or	photograph.)
C3. Elevations - Zones A1-A30, A Complete Items C3a-i below accoused for the BFE in Section B, co Use the space provided or the Co	ording to the building diagra	m specified in Item C2 d for the BFE. Show fie	. State the datum used. If the eld measurements and datum	conversion calculation.
Datum Conversi Elevation reference mark used <u>S</u>	on/Comments			
			154.50 ft.(m)	
X a) Top of bottom floor (includi	ng basement or enclosure)		157.50 ft.(m)	License Number, Embossed Seal, Signature, and Date
X b) Top of next higher floor□ c) Bottom of lowest horizontal	l structural member // zone	es only)	ft.(m)	
•			ft.(m)	
☐ d) Attach garage (top of slab)☒ e) Lowest elevation of machir		cina the building	154.50 ft.(m)	
		only are building	154.50 ft.(m)	
[X] f) Lowest adjacent grade (LA			154.50 ft.(m)	
[X] g) Highest adjacent grade (H/X) h) No. of permanent openings		ove adjacent grade 8	,	
(X) i) No. of permanent openings (X) i) Total area of all permanent			sq. in. (sq. cm)	
				ION
			RCHITECT CERTIFICAT	
This certification is to be signed and s I certify that the information in Section I understand that any false statement	s A. R. and C.on this certifi	cate represents my bea	st efforts to interpret the data	avaliable.
CERTIFIER'S NAME		LICENSE NU		
Russell W. Faust		6744 COMPANY N	AMF	
TITLE Civil Engineer		COMPANY N	CIVIL	
Civil Engineer ADDRESS		CITY	STATE	ZIP CODE
1070 Chestnut St NW		Salem	OR TELEPHO	97304 DNF
SIGNATURE		DATE 12/02/2		364-1206
		12,02,2		DI AGES ALL PREVIOUS EDITIONS

IMPORTANT: In these spaces, copy the corresponding information from Section A.					For Insurance Company Use:		
BUILDING STREET ADDRESS (In	ncluding Apt., Unit, Suite, and/or Bldg. No.) OR	P.O. ROUTE AND BOX	(NO.		Number		
River	CT.	ATE	ZIP CODE		02-5 pany NAIC Number		
CITY Salem		OR	97302		·		
	CTION D - SURVEYOR, ENGINEER			ONTINU	IED)		
	vation Certificate for (1) community of						
COMMENTS	valion continuate ior (i) community	, , ,					
Polk GPS #150							
					neck here if attachments		
		VEV NOT DECUIE	SED FOR ZONE AC				
SECTION E - BUILDING	ELEVATION INFORMATION (SUR	VEY NOT REQUIR	(ED) FOR ZONE AC	intende	d for use as supporting		
information for a LOMA or	(without BFE), complete Items E1 thr LOMR-F, Section C must be comple	ted.					
pages 6 and 7. If no di	ber - (Select the building diagram mo iagram accurately represents the bui	lding, provide a ske	etcn or pnotograph.)				
E2. The top of the floor (including basement or enclosure) of the building is 0 ft.(m) 0 in.(cm) □ above or □ below the highest adjacent grade.							
E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is							
E4. For 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.							
SE	CTION F - PROPERTY OWNER (OF	R OWNER'S REPR	RESENTATIVE) CEF	RTIFICAT	TON		
The property owner or own	ner's authorized representative who o	completes Section	A, B, and E for Zone	A (witho	ut FEMA -issued or		
community-issued BFE) or	r Zone AO must sign here.						
PROPERTY OWNER'S OR OWN Russell W. Faust	NER'S AUTHORIZED REPRESENTATIVE'S NA			07.475	ZIP CODE		
ADDRESS		CITY Salem		STATE OR	97304		
1070 Chestnut St NW SIGNATURE		DATE	TELE	PHONE			
COLUCTIO							
COMMENTS							
				□с	heck here if attachments		
	SECTION G - COMMU	JNITY INFORMAT	ION (OPTIONAL)				
The local official who is au	uthorized by law or ordinance to admind G of this Elevation Certificate. Cor	nister the commun	ity's floodplain mana	agement below.	ordinance can complete		
O4 - The information in	Section C was taken from other docu	imentation that has	s been signed and e	mbossed	by a licensed surveyor,		
engineer, or archite elevation data in th	ect who is authorized by state or loca ne Comments area below.)	I law to certify elev	ation information. (II	naicate tr	le source and date of the		
G2. A community official Zone AO.	al completed Section E for a building	located in Zone A	(without a FEMA-iss	ued or c	ommunity-issued BFE) or		
G3. ☐ The following infor	mation (Items G4-G9) is provided for	community floodpl	lain management pu	rposes.			
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6.	DATE CERTIFICATE OF CO	MPLIANCE/C	CCUPANCY ISSUED		
G7 This permit has been	issued for:	☐ Substantial Imp	provement				
G8. Elevation of as-built lo	owest floor (including basement) of the	ne building is:		t.(m)	Datum:		
G9. BFE or (in Zone AO)	depth of flooding at the building site i	s:	f	t.(m)	Datum:		
LOCAL OFFICIAL'S NAME		TITLE	LDI				
Les Sasaki		Princi TELEPHO	pal Planner PNE				
COMMUNITY NAME Marion County		(503)	588-5038				
SIGNATURE		DATE 12/03	3/2002				
COMMENTS		12/03	,, _ 00				
					Check here if attachments		
					JIION HOLO II GRADIIII OILL		

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

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

REVISED 12-7-02 RMF Important: Read the instructions on pages 1 - 7. For Insurance Company Use: SECTION A - PROPERTY OWNER INFORMATION Policy Number UILDING OWNER'S NAME Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number CITY ALEM PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc. BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) HORIZONTAL DATUM: SOURCE: GPS (Type): LATITUDE/LONGITUDE (OPTIONAL) Other: USGS Quad Map NAD 1927 ☐ NAD 1983 SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B3. STATE B2. COUNTY NAME B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER** ARION 41047 B9. BASE FLOOD ELEVATION(S) **B7. FIRM PANEL** B8. FLOOD **B6. FIRM INDEX B4 MAP AND PANEL B5. SUFFIX** (Zone AO, use depth of flooding) ZQNE(S) DATE EFFECTIVE/REVISED DATE NUMBER NOT DET. 1-19-2000 1-19-2000 410147C0650 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. Other (Describe): SEE ATT. CALC'S ☐ Community Determined ☐ FIRM ☐ FIS Profile B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe): **Designation Date** SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) Finished Construction C1. Building elevations are based on:
Construction Drawings*
Building Under Construction* *A new Elevation Certificate will be required when construction of the building is complete. 2. Building Diagram Number 8 (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 C3a-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. Conversion/Comments POLK GPS #150 Elevation reference mark used _____Does the elevation reference mark used appear on the FIRM? a) Top of bottom floor (including basement or enclosure)

 b) Top of payt higher floor

1573

579 ☐ b) Top of next higher floor c) Bottom of lowest horizontal structural member (V zones only) **N/A**_ft.(m) ☐ d) Attached garage (top of slab) ☐ e) Lowest elevation of machinery and/or equipment servicing the building ☐ f) Lowest adjacent grade (LAG) ☐ g) Highest adjacent grade (HAG) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 8 i) Total area of all permanent openings (flood vents) in C3570 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 COMPANY NAME TITLE **DRESS** REPLACES ALL PREVIOUS EDITIONS SEE REVERSE SIDE FOR CONTINUATION

IMPORTANT: In these spaces, copy the corres	For Insurance Company Use:		
BUILDING STREET ADDRESS (Including Apt., Unit, Suit	Policy Number		
CITY SALEM	STATE OR	9730Z	Company NAIC Number
SECTION D - SURVEYOR	R, ENGINEER, OR ARCHITI	ECT CERTIFICATION (CO	ONTINUED)
Copy both sides of this Elevation Certificate for (1)	community official, (2) insur	ance agent/company, and	d (3) building owner.
COMMENTS			
1911			
	A STANFARM		
		· · · · · · · · · · · · · · · · · · ·	
SECTION E - BUILDING ELEVATION INFORM	AATION (CLIDVEY NOT DE	OUIDED) FOR ZONE AO	Check here if attachments
For Zone AO and Zone A (without BFE), complete It information for a LOMA or LOMR-F, Section C must		zievauori Ceruncale is irile	ended for use as supporting
E1. Building Diagram Number (Select the building		building for which this ce	rtificate is being completed see
pages 6 and 7. If no diagram accurately repres	ents the building, provide a	sketch or photograph.)	
E2. The top of the bottom floor (including basement	or enclosure) of the building	is ② ft.(m)in.(cm) [above or below (check one)
the highest adjacent grade. E3. For Building Diagrams 6-8 with openings (see p	aga 7) the payt higher flee	or algusted floor (algustic	on b) of the building is
3 ft.(m) in.(cm) above the highest adjacent		or elevated hoor (elevant	or by or the building is
E4. For Zone AO only: If no flood depth number is a		ottom floor elevated in acc	cordance with the community's
floodplain management ordinance? Tyes [
	OWNER (OR OWNER'S R		والمرابع والم والمرابع والمرابع والمرابع والمرابع والمرابع والمرابع والمراب
The property owner or owner's authorized represer community-issued BFE) or Zone AO must sign here		ons A, B, and E for Zone A	A (without a FEMA-issued or
PROPERTY OWNER'S OR OWNER'S AUTHORIZED RE	PRESENTATIVE'S NAME		
PORESS KUSSELL W. FAU	CITY CITY	STAT	E ZIP CODE
SIGNATURE 1070 CHESTNUT	ST. NW CITS A	LEM OK	9/304
du	-4-		
COMMENTS			
			Check here if attachments
SECTION	G - COMMUNITY INFORM	ATION (OPTIONAL)	Uz Oneck here it attachments
he local official who is authorized by law or ordinan	ce to administer the commu	nity's floodplain manager	nent ordinance can complete
Sections A, B, C (or E), and G of this Elevation Certi	ficate. Complete the application	able item(s) and sign belo	w.
61. The information in Section C was taken from			
engineer, or architect who is authorized by s elevation data in the Comments area below.		evation information. (Indi	cate the source and date of the
G2. A community official completed Section E for		\ (without a FEMA-issued	or community-issued BFE) or
Zone AO.	Ü	•	•
63. The following information (Items G4-G9) is pr	ovided for community flood	olain management purpos	ses.
G4. PERMIT NUMBER G5. DATE PERM	MIT ISSUED	G6. DATE CERTIFICATE ISSUED	OF COMPLIANCE/OCCUPANCY
67. This permit has been issued for: New Con-			
68. Elevation of as-built lowest floor (including baseled). BFE or (in Zone AO) depth of flooding at the built		ft.(m) ft.(m)	Datum: Datum:
LOCAL OFFICIAL'S NAME	TITL		
COMMUNITY NAME		EPHONE	
SIGNATURE	DAT		
MMENTS	- UAI		
IMINICIALS			
			☐ Check here if attachments