## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.b. No. 5126 P. 2-O.M.b. No. 5067-6077 Expires July 31, 2002

## **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1 - 7.

| W.D. NO. 3007-0077  | 4         |
|---------------------|-----------|
| pires July 31, 2002 |           |
|                     | 100       |
|                     | -1-POL/11 |

|  |   | SECTION A-   | PROPERTY OWNER INFORM   | AATION  | For insurance Company Use:  |
|--|---|--|---|---|---|
| BUILDING OWNER'S NO<br>Carrie Allen  |   |  |   |   | Policy Number   |
|  |   | Apt., Unit, Suite, and/or E  | ildg. No.) OR P.O. ROUTE AND  | BÓX NO.   | Company NAIC Number   |
| CITY<br>Salem  |   |  | STATE<br>OR   | ZIP COI<br>97302  | DE  |
| Taxlot #2100 Map #083V   | V25D  | ·  | umber, Legal Description, etc.)   |   |   |
| Residential  |   |  | ory, etc. Use a Comments area,  |   | ·   |
| LATITUDE/LONGITUDE   | (OPTIONAL)<br>!:##### <sup>o</sup> )  |  | TAL DATUM:<br>□ NAD 1983  | SOURCE: GPS (Type<br>USGS Qu  |   |
|  |   | <u> </u>   | ISURANCE RATE MAP (FIRM)  | INFORMATION   |   |
| B1. NFIP COMMUNITY NAME<br>Marion County 410154  | & COMMUNITY NUM   |  | 2. COUNTY NAME<br>arton County  | B3<br>O   | D. STATE<br>R   |
| B4. NAP AND PANEL<br>NUMBER<br>410470676   | B5. SUFFIX<br>G   | 66. FIRM INDEX DATE<br>1-19-2000   | B7. FIRM PANEL<br>EFFECTIVE/REVISED DATE<br>1-19-2000   | B8. FLOOD ZONE(S)   | 89. BASE FLOOD ELEVATION(S)<br>(Zone AO, use depth of flooding)<br>316.50 |
| B11. Indicate the elevation da   | TRM<br>turn used for the BF   | ☐ Community Detern<br>E in B9: ☑ NGVD 1929   | mined 🔀 Other (Des  | cribe): Existing ground at buil 8   |   |
|  |   |  | EVATION INFORMATION (SU   |   | Podgilator, Palo  |
| C2. Building Diagram Numbe accurately represents the C3. Bevations – Zones A1-A2 Complete Items C3e-i b Section B, convert the data Section D or Section G, a Datum NGVD 1929 Cor Elevation reference mark a) Top of bottom floor b) Top of next higher table c) Bottom of lowest higher table c) Attached garage (to servicing the building f) Lowest elevation of servicing the building f) Lowest adjacent (fining f) No. of permanent of the case of the cas | ate will be required wing (Select the building) provide a sign, building, provide a sign, AH, A (with Ealow according to the turn to that used for its appropriate, to doce aversion/Comments used KAP Does the (including basement loor articontal structural machinery and/or eng (Describe in a Coished) grade (LAG) mished) grade (HAG) penings (flood vents manent openings (flood vents manent openings (flood vents) | when construction of the builting diagram most similar to to sketch or photograph.)  3FE), VE, V1-V30, V (with Be building diagram specified the BFE. Show field measurement the datum conversion elevation reference mark to or endosure)  ember (V zones only)  quipment  miments area)  )  within 1 ft. above adjacen on C3h 960 sq. in C3h 9 | Iding is complete.  the building for which this certificate if  BFE), AR, AR/A, AR/AE, AR/A1-A30  d in Item C2. State the deturn used.  urements and datum conversion calcon.  Used appear on the FIRM? Yes  321. 77.ft(m)  331. 67.ft(m)  320. 08.ft(m)  321. 44.ft(m) | The Baltum is different from the datum is different from the datum is different from the datum. Use the space provided in the space provided in the space of the | he datum used for the BFE in  |
| This partification is to be a  |   |  | , ENGINEER, OR ARCHITECT  |   |   |
| i certify that the information is understand that any felse CERTIFIER'S NAME   | n in Sections A, B,   | , and C on this certificate  | neer, or architect authorized by la<br>represents my best efforts to int<br>inprisonment under 18 U.S. Code   | erpret the data aveilable.<br>, Section 1001.   |   |
| Marcus T. Reedy TITLE  |   |  | A A A A A A A A A A A A A A A A A A A   | LICENSE NUMBER 2871   |   |
| Survey Manager<br>ADDRESS  |   |  | COMPANY NAME  | : David Evans & Associates In   |   |
| 530 Center St. Suite 605   |   |  | Salem   | STATE<br>OR   | ZIP CODE<br>97301   |
| SIGNATURE Marca 7  | T. Leady  | ,  | DATE<br>6-05-2002   | TELEPHO<br>(503) 381-   | NE .  |
|  |   |  |   |   |   |

## 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 OWNER INFORMATION   | For Insurance Company Use:  |
|--|---|
| BUILDING OWNER'S NAME  | Policy Number   |
| Carrie Allen   | FP01-14   |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 7495 Battlecreek Rd  | Company NAIC Number   |
| CITY STATE   | ZIP CODE  |
| Salem OR   | 97302   |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  Tax lot #2100 Map #083W25D   |   |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.)  |   |
| Residential  |   |
| LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (T   |   |
| NAD 1927 ☐ NAD 1983 ☐ USGS (   | Quad Map   Other:   |
| SECTION B - INSURANCE RATE MAP (FIRM) INFORMATION  |   |
| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER  B2. COUNTY NAME  | B3. STATE   |
| Marion County 410154 410154 Marion County  | OR  |
| B4. MAP AND PANEL NUMBER B5. SUFFIX B6. FIRM INDEX DATE B7. FIRM PANEL B8. FLOOD ZONE EFFECTIVE/REVISED DATE   | · ·   |
| 41047C0676 G 01/19/2000 01/19/2000 A   | (Zone AO, use depth of flooding)  |
| 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): exis   | stinground at building site   |
| B11. Indicate the elevation datum used for the BFE in B9: 🗵 NGVD 1929 🗆 NAVD 1988 🗆 Other  | er (Describe):  |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected  |   |
| Designation Date:  | , ,   |
| SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQL  | IIRED)  |
| 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.   | X Finished Construction   |
| · · · · · · · · · · · · · · · · · · ·  | tala data a correction of the second  |
| C2. Building Diagram Number (Select the building diagram most similar to the building for whi see instruction pages 6 and 7. If no diagram accurately represents the building, provide a sketch of   | or photograph )   |
| C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AI   |   |
| Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum used. If the  | VATASU, ANAH, ANAU.   |
| used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datu  | e datum is different from the datum   |
| The state of the s | m conversion calculation.   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date  | m conversion calculation.   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments  | m conversion calculation.<br>um conversion.   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments Does the elevation reference mark used appear on the FIR   | m conversion calculation.<br>um conversion.   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments Does the elevation reference mark used appear on the FIR [X] a) Top of bottom floor (including basement or enclosure) ft.(m)   | m conversion calculation.  um conversion.  M?   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments Does the elevation reference mark used appear on the FIR   | m conversion calculation. um conversion.  M?  |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments Does the elevation reference mark used appear on the FIR   | m conversion calculation.  um conversion.  M?   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments Does the elevation reference mark used appear on the FIR   | m conversion calculation.  um conversion.  M?   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments Does the elevation reference mark used appear on the FIR Elevation reference mark used Does the elevation reference mark used appear on the FIR XI a) Top of bottom floor (including basement or enclosure) ft.(m) XI b) Top of next higher floor ft.(m) C) Bottom of lowest horizontal structural member (V zones only) ft.(m) XI d) Attach garage (top of slab) ft.(m) XI e) Lowest elevation of machinery and/or equipment servicing the building ft.(m)  | m conversion calculation.  um conversion.  M?   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments Does the elevation reference mark used appear on the FIR Elevation reference mark used Does the elevation reference mark used appear on the FIR XI a) Top of bottom floor (including basement or enclosure) ft.(m) XI b) Top of next higher floor ft.(m) C) Bottom of lowest horizontal structural member (V zones only) ft.(m) XI d) Attach garage (top of slab) ft.(m) XI e) Lowest elevation of machinery and/or equipment servicing the building ft.(m) CI f) Lowest adjacent grade (LAG) ft.(m)   | m conversion calculation.  um conversion.  M?   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments  | m conversion calculation.  um conversion.  M?   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments  | m conversion calculation.  um conversion.  M?   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments  | m conversion calculation.  um conversion.  M?   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments Elevation reference mark used Does the elevation reference mark used appear on the FIR   | m conversion calculation. um conversion.  M? Yes No  License Number, Embossed Seal, Signature, and Date   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments  | m conversion calculation. um conversion.  M? Yes No  License Number, Embossed Seal, Signature, and Date   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments  | m conversion calculation. um conversion.  M? Yes No  License Number, Embossed Seal, Signature, and Date   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments Does the elevation reference mark used appear on the FIR Does the elevation reference mark used appear on the FIR Does the elevation reference mark used appear on the FIR Does the elevation reference mark used appear on the FIR Does the elevation reference mark used appear on the FIR Does the elevation reference mark used appear on the FIR Does the elevation reference mark used appear on the FIR Does the elevation reference mark used appear on the FIR Does the elevation reference mark used appear on the FIR   | m conversion calculation. um conversion.  M? Yes No  License Number, Embossed Seal, Signature, and Date   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments Does the elevation reference mark used appear on the FIR   | m conversion calculation. um conversion.  M? Yes No  License Number, Embossed Seal, Signature, and Date   |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments  | m conversion calculation.  Im conversion.  M? Yes No  License Number, Embossed Seal, Signature, and Date  TION  vation information.  a available.           |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum  | m conversion calculation.  Im conversion.  M? Yes No  License Number, Embossed Seal, Signature, and Date  TION  vation information.  a available.  ZIP CODE |
| Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the date Datum Conversion/Comments  | m conversion calculation.  m conversion.  M?  |

| IMPORTANT: In these spaces,  | , copy the corresponding inform   | nation from               | Section A.                                    | Г                             | For Insurance Company Use:   |
|--|---|---------------------------|---|-------------------------------|--|
| UILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg, No.) OR P.O. ROUTE AND BOX NO.   |   |                           | Policy Number                                 |                               |  |
| Battlecreek<br>CITY  |   |                           |   |                               | FP01-14  |
| Salem  | STATE   |                           | ZIP CODE                                      |                               | Company NAIC Number  |
| <del></del>  | N.D. SLIDVEYOR ENGINEER O   |                           | 97302   |                               |  |
| Copy both sides of this Florette   | N D - SURVEYOR, ENGINEER, C   | OR ARCHIT                 | ECT CERTIFICATION                             | ON (CONT                      | INUED)   |
| COMMENTS   | n Certificate for (1) community office  | cial, (2) insu            | rance agent/compa                             | ny, and (3                    | ) building owner.  |
|  | nent is a water heater located in th  | e narane                  |   |                               |  |
|  |   | o garago.                 |   |                               |  |
|  |   |                           |   |                               |  |
|  |   |                           |   |                               |  |
|  |   |                           |   |                               | Chaolchana if attack   |
| SECTION E - BUILDING ELE   | VATION INFORMATION (SURVE   | Y NOT PE                  | TIIDED) EOD ZONI                              | E AO AND                      | Check here if attachments  |
| For Zone AO and Zone A (without  | ut BFE), complete Items E1 through  | ab E4 If the              | DE Elevation Continu                          | E AU ANL                      | ZONE A (WITHOUT BFE)   |
| INTO THE BUILDING OF LOWER   | x-r, section & must be completed  |                           |   |                               | · · · <del>-</del>   |
| pagoo o ana r. Ii no diagran   | (Select the building diagram most<br>n accurately represents the buildin                  | ng, provide a             | a sketch or photogra                          | this certif<br>ph.)           | icate is being completed - see   |
| the highest adjacent grade.  | g basement or enclosure) of the b   |                           |   | 6  in.(cm                     |  |
| 1  | ith openings (see page 7), the next.cm) above the highest adjacent                        | grade.                    |   |                               |  |
| E4. For Zone AO only: If no flood floodplain management ordi   | d depth number is available, is the nance? $\ \square$ Yes $\ \square$ No $\ \square$ Unk | top of the b<br>nown. The | ottom floor elevated<br>local official must c | l in accord<br>ertify this in | ance with the community's offermation in Section G.  |
| SECTION  | N F - PROPERTY OWNER (OR O  | WNER'S R                  | EPRESENTATIVE)                                | CERTIFIC                      | ATION  |
| The property owner or owner's a  | uthorized representative who com-   | pletes Sect               | on A. B. and E for Z                          | one A (wit                    | hout FEMA -issued or   |
| community-issued BFE) or Zone  | AO must sign here.  | •                         | , , ,   |                               | Tour Elvir Isodou of   |
|  | JTHORIZED REPRESENTATIVE'S NAME   |                           |   |                               |  |
| ADDRESS  |   | CITY                      |   | STATE                         | ZIP CODE   |
| SIGNATURE  |   | DATE                      | T   | ELEPHONE                      |  |
| COMMENTS   |   | 1747                      |   |                               | -  |
|  |   |                           |   |                               |  |
|  |   |                           |   |                               | Check here if attachments  |
|  | SECTION G - COMMUNIT  | TY INFORM                 | ATION (OPTIONAL                               |                               |  |
| The local official who is authorize Sections A, B, C (or E), and G of  | ed by law or ordinance to administe<br>this Elevation Certificate. Comple                 | er the comn               | nunity's floodplain m                         | anagemer                      | nt ordinance can complete  |
| G1. X The information in Section   | C was taken from other documer  | ntation that              | has been signed an                            | d emboss                      | ed by a licensed suprevor  |
| engineer, or architect who<br>elevation data in the Com  | ) is authorized by state or local law   | v to certify e            | levation information                          | . (Indicate                   | the source and date of the   |
| G2. A community official comp<br>Zone AO.  | pleted Section E for a building loca  | ated in Zone              | A (without a FEMA                             | -issued or                    | community-issued BFE) or   |
| G3.   The following information  | (Items G4-G9) is provided for com   | nmunity floo              | dplain management                             | purposes                      |  |
| G4. PERMIT NUMBER  | G5. DATE PERMIT ISSUED  |                           | G6. DATE CERTIFICATE OF                       |                               |  |
|  |   |                           |   |                               |  |
| G7. This permit has been issued  | for:  | Substantial I             | mprovement                                    |                               |  |
| Go. BEE and the Research of th | oor (including basement) of the bu  | uilding is:               |   | _ ft.(m)                      | Datum:   |
| G9. BFE or (in Zone AO) depth of   | flooding at the building site is:   |                           |   | ft.(m)                        | Datum:   |
| LOCAL OFFICIAL'S NAME  |   | TITLE                     |   |                               |  |
| Les Sasaki<br>COMMUNITY NAME   |   |                           | ncipal Planner                                |                               | What is a second |
| Marion County  |   |                           | THONE<br>3) 588-5038                          |                               |  |
| SIGNATURE  |   | DATE                      | <u>.,</u>                                     |                               |  |
| COMMENTS   |   | 07/                       | 25/2002                                       | ***                           |  |
|  |   |                           |   |                               |  |
|  |   |                           |   |                               |  |
|  |   |                           |   |                               | ****   |
|  |   |                           |   |                               | Check here if attachments  |
|  |   |                           |   |                               | CHOOK HOLD II ALLACHITICIILS   |

| JUL. 25. 2002_11:  |   |   | N(                                  | ). 6126F. 3                      |
|--|---|---|-------------------------------------|----------------------------------|
| IMPORTANT: In these space  | es, copy the corresponding information fro  | m Section A.                                  |                                     | or Insurance Company Use         |
| BUILDING STREET ADDRESS (Inch. 7495 Battlecreek Road               | oding Apt, Unit, Suite, and/or Blog. No.) OR P.O. ROUTE At  | ND BOX NO.                                    | 1                                   | Policy Number                    |
| Crity<br>Salem   | \$  |   |                                     | Company NAIC Number              |
|  | SECTION D - SURVEYOR, ENGINEER, OR  |   |                                     |                                  |
| Copy both sides of this Elevation                                  | Certificate for (1) community official, (2) insurance age   |   | OOM INVEST                          |                                  |
| COMMENTS   | occurred to (1) community small, (a) model to set   | A recomposity, para toy bearing on res.       |                                     |                                  |
|  | it is a water heater located in the garage  |   |                                     |                                  |
|  |   |   |                                     |                                  |
|  |   |   |                                     |                                  |
|  |   |   |                                     |                                  |
| OFOTION F. DUM   |   |   |                                     |                                  |
|  | DING ELEVATION INFORMATION (SURVE)  |   |                                     | <del></del>                      |
| -or zone AU and zone A (without E<br>Section C must be completed.  | BFE), complete Items E1 through E4. If the Elevation  | Certificate is intended for use as support    | orting information for              | a LOMA or LOMR-F,                |
| •  | elect the building diagram most similar to the building t   | for which this certificate is being comple    | eled usee names 6 :                 | and 7. If no diagram accurately  |
| represents the building, provide                                   |   | or tribut a no octonocia d condicion          | aca – aco pagas o                   | alo 7. II IV viagiani avvalsta)  |
|  | uding basement or enclosure) of the building is $2$ ft.(  | m) <u>&amp;</u> in.(cm) 🖾 above or 🔲 below (c | theck one) the high                 | sladjacent grade. (Lise          |
| natural grade, if available).                                      |   |   |                                     |                                  |
| 23. For Building Diagrams 6-8 with<br>grade. Complete items C3.h a | openings (see page 7), the next higher floor or elevati   | ed floor (elevation b) of the building is     | <u>12</u> ft.(m) <u>9</u> in.(cm) a | bove the highest adjacent        |
|  | epth number is available, is the top of the bottom floor  | elevated in accordance with the comp          | nunitys floodolain m                | anagement Artificance?           |
|  | wn. The local official must certify this information in Se  |   | main's noodhan in                   | an redair ter it or order ico:   |
|  | SECTION F - PROPERTY OWNER (OR OW   | NER'S REPRESENTATIVE) CEF                     | RTIFICATION                         |                                  |
| The property owner or owner's au                                   | thorized representative who completes Sections A, B,  | C (Items C3.h and C3.i only), and E to        | r Zone A (without a                 | FEMA-issued or community-        |
|  | n here. The statements in Sections A, B, C, and E an  | e correct to the best of my knowledge.        |                                     |                                  |
| PROPERTY OWNER'S OR OW!  | NER'S AUTHORIZED REPRESENTATIVE'S NAME  |   |                                     |                                  |
| ADDRESS  |   | CITY  | STATE                               | ZIP CODE                         |
| 284 Mandrin Dr.  |   | Keizer  | OR                                  | 97303                            |
| SIGNATURE  |   | DATE  | TELEPHON                            | Ē                                |
| COMMENTS   |   |   |                                     | ,                                |
|  | M-10-10-10-10-10-10-10-10-10-10-10-10-10-   |   |                                     |                                  |
|  |   |   | ··-                                 | Latin Latin Latin                |
|  | SECTION C COMMUNITY   | INFORMATION (OPTIONAL)                        |                                     | Check here if attachments        |
| he incal official who is authorized by                             | y law or profinance to administer the community's floo  |   | nnkata Cardinas, i                  | C for El cont C of this Els as   |
| cartificate. Complete the applicable                               | item(s) and sign below.   | obien meneficinani ricinimina can con         | npes decivis A, s                   | , C (OF E), and G OF this Eleval |
| 31. 🔲 The information in Section 0                                 | was taken from other documentation that has been  | signed and embossed by a licensed su          | irveyor, engineer, or               | architect who is authorized by   |
|  | slevation information. (Indicate the source and date of   |   |                                     |                                  |
| 52. A community official comple                                    | ted Section E for a building located in Zone A (withou<br>erris G4-G9) is provided for community floodplain mai   | t a FEMA-issued or community-issued           | BFE) or Zone AO.                    |                                  |
|  |   | -   |                                     |                                  |
| G4. PERMIT NUMBER  | G5. DATE PERMIT ISSUED  | G6. DATE CERTIFICA                            | ATE OF COMPLIANC                    | E/OCCUPANCY ISSUED               |
| 57. This permit has been issued for                                | □ New Construction □ Substantial Improvemen   | nt  |                                     |                                  |
| 38. Elevation of as-built lowest floor                             | (including basement) of the building is:  |   | t(m)                                | Datum:                           |
| 39. BFE or (in Zone AO) depth of flo                               | ooding at the building afte is:   |   | fL(m)                               | Datum:                           |
| LOCAL OFFICIAL'S NAME  |   | TITLE   |                                     |                                  |
| COMMUNITY NAME   | MANA STATE OF THE | TELEPHONE                                     |                                     |                                  |
| SIGNATURE  |   | DATE  |                                     | ·                                |
| COMMENTS   |   |   |                                     |                                  |
|  |   |   |                                     |                                  |
|  |   |   |                                     | ·                                |
|  |   |   |                                     | Check here if attachments        |