

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

CP 18-2

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name City of Salem				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 5915 Windsor Island Road N				Company NAIC Number:	
City Keizer	State Oregon	ZIP Code 97303			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Willow Lake Water Pollution Control Facility, Tax Lot 200, Section 33, Township 6 South, Range 3, West, Willamete Meridian					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Accessory - Thickening Polymer Building</u>					
A5. Latitude/Longitude: Lat. <u>45°00'31.35"</u> Long. <u>-123°03'14.34"</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <u>1A</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A8.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>N/A</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A9.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Marion County Unincorporated Areas No. 410154			B2. County Name Marion		B3. State Oregon
B4. Map/Panel Number 41047C0193	B5. Suffix G	B6. FIRM Index Date 2000 01-19-2020 <u>10-18-2019</u>	B7. FIRM Panel Effective/ Revised Date 01-19-2020 <u>2000</u>	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 128.0'
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

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. 5915 Windsor Island Road N			Policy Number:
City Keizer	State Oregon	ZIP Code 97303	Company NAIC Number

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. 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 C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: City of Salem BM "Willow" Vertical Datum: NGVD29

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929 NAVD 1988 Other/Source: _____

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- | | | | |
|---|-------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) | 131.4 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor | N/A | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | N/A | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | N/A | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building
(Describe type of equipment and location in Comments) | 131.8 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | 131.4 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | 131.4 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | N/A | <input type="checkbox"/> feet | <input type="checkbox"/> meters |

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 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.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.

Certifier's Name Paul M. Kowalczyk	License Number 79315	<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">REGISTERED PROFESSIONAL LAND SURVEYOR</div> <div style="font-size: 2em; font-weight: bold; margin-bottom: 5px;">Digitally Signed</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">OREGON DECEMBER 03, 2014 PAUL M. KOWALCZYK 79315</div> <div style="font-weight: bold;">RENEWS: JUNE 30, 2021</div>	
Title City Surveyor			
Company Name City of Salem			
Address 555 Liberty St. SE, Suite 325			
City Salem	State Oregon		ZIP Code 97301-3513
Signature Paul Kowalczyk	Date 2020.12.22 12:18:43-08'00'	Telephone (503) 588-6211	Ext. 7315

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)

C2(a) Building sits on a concrete slab with no approved flood openings. North one-third of FF is separated by a 0.50 foot tall concrete curb. Finish floor south of curb is graded to drain into a drain in approximately the center of the structure. Top elevation of grate drain is 131.3 feet. Bottom elevation of drain is 130.5 feet. There is a 12"x20" air vent on the east wall that is positioned 10 inches above the finish floor. Bottom of vent elevation is approximately 132.2 feet.
C2(e) There are electrical and fluid control panels that are mounted on top of 0.50 foot tall concrete pads that are located on the south two-thirds of the building.