

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

NO. 6126—P. 2  
O.M.B. NO. 3067-0011  
Expires July 31, 2002

FP01-14

**ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		
BUILDING OWNER'S NAME Carrie Allen		For Insurance Company Use: Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 7495 Battlecreek Road S.E.		Company NAIC Number
CITY Salem	STATE OR	ZIP CODE 97302
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Taxlot #2100 Map #083W25D		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential		
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##"###" or ###.####")	HORIZONTAL DATUM <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Marion County 410154		B2. COUNTY NAME Marion County		B3. STATE OR	
B4. MAP AND PANEL NUMBER 41047C676	B5. SUFFIX G	B6. FIRM INDEX DATE 1-19-2000	B7. FIRM PANEL EFFECTIVE/REVISED DATE 1-19-2000	B8. FLOOD ZONE(S) AX	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 318.50

- 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): Existing ground at building site
- B11. Indicate the elevation datum used for the BFE in B9:  NGVD 1929  NAVD 1988  Other (Describe):
- B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No Designation Date

**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. 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, Y (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO  
 Complete items C3-e-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.  
 Datum NGVD 1929 Conversion/Comments

Elevation reference mark used KAP. Does the elevation reference mark used appear on the FIRM?  Yes  No

a) Top of bottom floor (including basement or enclosure) 321.77 ft.(m)

b) Top of next higher floor 331.87 ft.(m)

c) Bottom of lowest horizontal structural member (V zones only) \_\_\_\_\_ ft.(m)

d) Attached garage (top of slab) 320.08 ft.(m)

e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 321.44 ft.(m)

f) Lowest adjacent (finished) grade (LAG) \_\_\_\_\_ ft.(m)

g) Highest adjacent (finished) grade (HAG) 319.12 ft.(m)

h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 15

i) Total area of all permanent openings (flood vents) in C3.h 960 sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

**REGISTERED PROFESSIONAL LAND SURVEYOR**

*Marcus T. Reedy*

**OREGON**  
JUL 21 1998  
**MARCUS T. REEDY**  
02871 LS

**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 Marcus T. Reedy		LICENSE NUMBER 2871	
TITLE Survey Manager	COMPANY NAME : David Evans & Associates Inc.		
ADDRESS 530 Center St. Suite 606	CITY Salem	STATE OR	ZIP CODE 97301
SIGNATURE <i>Marcus T. Reedy</i>	DATE 6-05-2002	TELEPHONE (503) 381-8635	

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

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

**ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1 - 7.

**SECTION A - PROPERTY OWNER INFORMATION**

BUILDING OWNER'S NAME Carrie Allen		For Insurance Company Use: Policy Number 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 Salem	STATE OR	ZIP CODE 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) (##-##-##.##" or ##.####)	HORIZONTAL DATUM: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:	

**SECTION B - INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Marion County 410154 410154		B2. COUNTY NAME Marion County		B3. STATE OR	
B4. MAP AND PANEL NUMBER 41047C0676	B5. SUFFIX G	B6. FIRM INDEX DATE 01/19/2000	B7. FIRM PANEL EFFECTIVE/REVISED DATE 01/19/2000	B8. FLOOD ZONE(S) A	B9. BASE FLOOD (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): existingground at building site
- B11. Indicate the elevation datum used for the BFE in B9:  NGVD 1929  NAVD 1988  Other (Describe):
- B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No  
Designation Date: \_\_\_\_\_

**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. Building Diagram Number \_\_\_\_\_ (Select the building diagram most similar to the building for which this certificate is being completed - see instruction 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.  
Datum \_\_\_\_\_ Conversion/Comments \_\_\_\_\_  
Elevation reference mark used \_\_\_\_\_ . Does the elevation reference mark used appear on the FIRM?  Yes  No
- |  |                      |  |
|--|----------------------|--|
| <input checked="" type="checkbox"/> a) Top of bottom floor (including basement or enclosure)                     | _____ ft.(m)         | License Number, Embossed Seal, Signature, and Date |
| <input checked="" type="checkbox"/> b) Top of next higher floor  | _____ ft.(m)         |  |
| <input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)                         | _____ ft.(m)         |  |
| <input checked="" type="checkbox"/> d) Attach garage (top of slab)   | _____ ft.(m)         |  |
| <input checked="" type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building     | _____ ft.(m)         |  |
| <input type="checkbox"/> f) Lowest adjacent grade (LAG)  | _____ ft.(m)         |  |
| <input checked="" type="checkbox"/> g) Highest adjacent grade (HAG)  | _____ ft.(m)         |  |
| <input checked="" type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade | 15                   |  |
| <input checked="" type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h                 | 960 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 Marcus T. Reedy	LICENSE NUMBER 02871
TITLE Reg. Prof. Land Surveyor	COMPANY NAME David Evans & Assoc's, Inc.
ADDRESS 530 Center St Ste 605	CITY STATE ZIP CODE Salem OR 97301
SIGNATURE	DATE TELEPHONE 06/05/2002 (503) 361-8635

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Battlecreek			For Insurance Company Use:	
CITY Salem	STATE OR	ZIP CODE 97302	Policy Number FP01-14	
			Company NAIC Number	

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

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

COMMENTS

The lowest elevation of equipment is a water heater located in the garage.

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number - (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.)
- E2. The top of the floor (including basement or enclosure) of the building is | 2 |ft.(m) | 6 |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 | 12 |ft.(m) | 9 | in.(cm) above the highest adjacent grade.
- 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.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Section A, B, and E for Zone A (without FEMA -issued or community-issued BFE) or Zone AO must sign here.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS CITY STATE ZIP CODE

SIGNATURE DATE TELEPHONE

COMMENTS

Check here if attachments

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1.  The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.  A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3.  The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building 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 Les Sasaki	TITLE Principal Planner
COMMUNITY NAME Marion County	TELEPHONE (503) 588-5038
SIGNATURE	DATE 07/25/2002
COMMENTS	

Check here if attachments

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			For Insurance Company Use
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 7496 Battlecreek Road			Policy Number
CITY Salem	STATE OR	ZIP CODE 97302	Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

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

**COMMENTS**

The lowest elevation of equipment is a water heater located in the garage

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zone AO and Zone A (without BFE), complete items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number 2 (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.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is 2 ft.(m) 9 in.(cm)  above or  below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is 12 ft.(m) 9 in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- 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.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

Carrie Allen

ADDRESS	CITY	STATE	ZIP CODE
284 Mandarin Dr.	Keizer	OR	97303

SIGNATURE	DATE	TELEPHONE
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**COMMENTS**

Check here if attachments

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1.  The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.  A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3.  The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building 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 \_\_\_\_\_

COMMUNITY NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**COMMENTS**

Check here if attachments