ELEVATION CERTIFICATE

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

OEM No. 1660-0008
Expires February 28, 2008

SECTION A - PROPERTY INFORMATION

A1. Building Owner’s Name: Whispering Pines Ranch (Thomas Stewart Living Trust)  
A2. Building Street Address (including Apt., Unit, Suite, and/or Blk. No.) or P.O. Route and Box No.: 10662 E. Scholl Rd.
A3. City, State, ZIP Code: Parks, AZ 85018

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number: Coconino County Unincorporated Areas - 040019
B2. County Name: Coconino
B3. State: AZ

B4. Flood Map Panel Number: 0050
B5. Suffix: B
B6. FIRMS Date: Sept. 30, 1995
B7. FIRMS Panel Effective/Revised Date: Nov. 16, 1983
B8. Flood Zone(s): C
B9. Base Flood Elevation(s) (Zone AO, Use base flood depth): 6818.75 (see comments)

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.


Benchmark Used: USGS BM 002022 Vertical Datum: NAVD88
Conversion/Comments: 

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or encloosure floor): 6819.0 feet [ ] meters (Puerto Rico only)
   b) Top of the next higher floor: 6819.0 feet [ ] meters (Puerto Rico only)
   c) Bottom of the lowest horizontal structural wall (V Zone only): [ ] feet [ ] meters (Puerto Rico only)
   d) Attached garage (top of wall): [ ] feet [ ] meters (Puerto Rico only)
   e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments): [ ] feet [ ] meters (No machinery servicing bldg.)
   f) Lowest adjacent (finished) grade (LAD): 6818.9 feet [ ] meters (Puerto Rico only)
   g) Highest adjacent (finished) grade (HAG): 6818.9 feet [ ] meters (Puerto Rico only)

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 of the data available and that any false statement may be punishable by fine or imprisonment under 16 U.S. Code, Section 1001.

Check here if comments are provided on back of form.

Certifier’s Name: Martin H. Martin, L.S.
License Number AZ LS15845
Title: President
Company Name: Martin Land Surveys, Inc.
Address: 3526 N. Walker Street
City: Flagstaff
State: AZ
ZIP Code: 86004

Signature: ____________________________
Date: May 28, 2006
Phone: 928-526-0270

FEMA Form 81-31, February 2006

See reverse side for continuation. Replaces all previous editions

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

This section is optional.

G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by 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 shall sign here.

G3. The information in following items (G4-G9) is provided for community floodplain management purposes.

G4. Permit Number: ____________________________
G5. Date Permit Issued: ____________________________
G6. Date Certificate of Compliance/Occupancy Issued: ____________________________

G7. This permit has been issued for: [ ] New Construction [ ] Substantial Improvement

G8. Elevation of abut-basement lowest floor (including basement) of the building: [ ] feet [ ] meters (PR) Datum

G9. BFE (or in Zone AO) depth of flooding at the building site: [ ] feet [ ] meters (PR) Datum

Local Official’s Name: ____________________________
Title: ____________________________
Company Name: ____________________________
Signature: ____________________________
Comments: ____________________________