ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name ROSS STEVEN BARNOLI

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
17825 S. WALAPAI ROAD

City MUNDS PARK State AZ ZIP Code 86017

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) OAKWOOD #1, LOT 72 AND THE NORTHERLY 20' OF LOT 77, APN #400-54-072B

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. 34°39'54" Long. 111°53'15"

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number 8

A8. For a building with a crawl space or enclosure(s):
   a) Square footage of crawl space or enclosure(s) 1286 sq ft
   b) No. of permanent flood openings in the crawl space or enclosure(s) within 1.0 foot above adjacent grade 0
   c) Total net area of flood openings in A8,b 0 sq in
   d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:
   a) Square footage of attached garage 402.8 sq ft
   b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0
   c) Total net area of flood openings in A9,b 0 sq in
   d) Engineered flood openings? ☐ Yes ☒ No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number COCONINO COUNTY UNINCORPORATED 040019

B2. County Name COCONINO

B3. State AZ

B4. Map/Panel Number 0400197459

B5. Suffix G

B6. FIRM Index Date SEPTEMBER 03, 2010

B7. FIRM Panel Effective/Revised Date SEPTEMBER 03, 2010

B8. Flood Zone(s) AE

B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 6452.00

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
   ☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other (Describe) Other (Describe)

B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other (Describe) Other (Describe)

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☐ No
   Designation Date NA
   ☐ CBRS ☐ OPA

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 Utilized RM67 AL CAP LS'7344 Vertical Datum BB
   Conversion/Comments +3.17

   a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 6457.83 ☒ feet ☐ meters (Puerto Rico only)
   b) Top of the next higher floor 6453.95 ☒ feet ☐ meters (Puerto Rico only)
   c) Bottom of the lowest horizontal structural member (V Zones only) NA
   d) Attached garage (top of slab) 6463.75 ☒ feet ☐ meters (Puerto Rico only)
   e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 6458.60 ☒ feet ☐ meters (Puerto Rico only)
   f) Lowest adjacent (finished) grade next to building (LAG) 6457.83 ☒ feet ☐ meters (Puerto Rico only)
   g) Highest adjacent (finished) grade next to building (HAG) 6462.80 ☒ feet ☐ meters (Puerto Rico only)
   h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 6460.42 ☒ 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 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.

Check here if comments are provided on back of form.
Were latitude and longitude in Section A provided by a licensed land surveyor? ☐ Yes ☒ No

Certifier's Name STANLEY L. NIEHUSER License Number 29884
Title SURVEYOR Company Name ARIZONA LAND SOLUTIONS
Address 2673 N. OAKMONT DR. City FLAGSTAFF State AZ ZIP Code 86004
Signature  Date 9/5/13 Telephone 928-549-9204

FEMA Form 81-81, Mar 09

See reverse side for continuation.
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: LATITUDE AND LONGITUDE TAKEN FROM COCONINO COUNTY GIS. WATER HEATER IN CRAWLSPACE.

Signature: ___________________________  Date: 9/5/13

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

For Zones AO and A (without BFE), complete items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
   a) Top of bottom floor (including basement, crawlspace, or enclosure) is ________ feet ________ meters above or below the HAG.
   b) Top of bottom floor (including basement, crawlspace, or enclosure) is ________ feet ________ meters above or below the LAG.

E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagram) of the building is __________ feet __________ meters above or below the HAG.

E3. Attached garage (top of slab) is ________ feet ________ meters above or below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is ________ feet ________ meters above or below the HAG.

E5. 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 ☐

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

The property owner or owner’s authorized representative who completes Sections A, B, 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, and E are correct to the best of my knowledge.

Property Owner’s or Owner’s Authorized Representative’s Name:

Address: __________________________ City: __________________________ State: __________________________ ZIP Code: __________________________

Signature: __________________________ Date: __________________________ Telephone: __________________________

Comments: __________________________

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. Check the measurement used in Items G8 and G9.

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.

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: __________________________

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

G8. Elevation of as-built 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 ________

G10. Community’s design flood elevation: ________ feet ________ meters (PR) Datum ________

Local Official’s Name: __________________________ Title: __________________________
Community Name: __________________________ Telephone: __________________________

Signature: __________________________ Date: __________________________

Comments: __________________________

☐ Check here if attachments

EMA Form 81-31, Mar 09
Replaces all previous editions
Building Photographs
See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
17825 S. WALAPAI ROAD

City MUNDS PARK State AZ ZIP Code 86017

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; “Front View” and “Rear View”; and, if required, “Right Side View” and “Left Side View.” If submitting more photographs than will fit on this page, use the Continuation Page, following.

FRONT VIEW
Building Photographs
Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
17825 S. WALAPAI ROAD

City MUNDS PARK State AZ ZIP Code 86017

For Insurance Company Use:
Policy Number

Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."

REAR VIEW