

# EL E V A T I O N C E R T I F I C A T E

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

SECTION A – PROPERTY INFORMATION		FOR INSURANCE COMPANY USE	
A1. Building Owner's Name <b>D.L.&amp; M.D. Pederson</b>		Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>7 Comstock Circle</b>		Company NAIC Number:	
City <b>Carson City</b>		State <b>NV</b>	ZIP Code <b>89703</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Ormsby Subdivision Lot 9 APN# 003-321-09</b>			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>			
A5. Latitude/Longitude: Lat. <b>39°09'59.38" N</b>		Long. <b>119°45'51.97" W</b>	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 <b>9</b>			
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) <b>1329</b> sq ft		A9. For a building with an attached garage: a) Square footage of attached garage <b>673</b> sq ft	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>7</b>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>0</b>	
c) Total net area of flood openings in A8.b <b>0.54</b> sq ft		c) Total net area of flood openings in A9.b <b>0</b> sq ft	
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		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 <b>Carson City / 320001</b>		B2. County Name <b>Carson City</b>		B3. State <b>NV</b>	
B4. Map/Panel Number <b>320001/0091- 0092</b>	B5. Suffix <b>F</b>	B6. FIRM Index Date <b>02/19/2014</b>	B7. FIRM Panel Effective/Revised Date <b>02/19/2014</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>

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/Source: \_\_\_\_\_

B11. Indicate elevation datum used for BFE in Item B9:  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_

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

Designation Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  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.

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: \_\_\_\_\_

Vertical Datum: \_\_\_\_\_

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)	_____ . _____	<input type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	_____ . _____	<input type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____ . _____	<input type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	_____ . _____	<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)	_____ . _____	<input type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	_____ . _____	<input type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	_____ . _____	<input type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____ . _____	<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.

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  
 Check here if attachments.

Certifier's Name		License Number	
Title		Company Name	
Address		City	State
Signature		Date	Telephone

PLACE  
SEAL  
HERE

## ELEVATION CERTIFICATE, page 2

<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. 7 Comstock Circle			Policy Number:
City Carson City	State NV	ZIP Code 89703	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  
Hot water heater and furnace are in garage and are elevated 1.4' above floor  
Electric and gas meters are located on the North side of house.

Signature

Date 08/07/2014

### 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 1 . 45  feet  meters  above or  below the HAG.  
b) Top of bottom floor (including basement, crawlspace, or enclosure) is 0 . 95  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 diagrams) of the building is 1 . 06  feet  meters  above or  below the HAG.

E3. Attached garage (top of slab) is 0 . 1  feet  meters  above or  below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is 1 . 4  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. 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, 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 or Owner's Authorized Representative's Name Dennis Pederson

Address 7 Comstock Circle	City Carson City	State NV	ZIP Code 89703
Signature <i>Dennis Pederson</i>	Date 08/06/2014	Telephone (775) 883-2390	

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. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

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
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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:    .     feet  meters Datum \_\_\_\_\_

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

G10. Community's design flood elevation:    .     feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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 PO. Route and Box No. 7 Comstock Circle			Policy Number:
City Carson City	State NV	ZIP Code 89703	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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Frontview left side  
August 5, 2014



Frontview right side  
August 5, 2014



Rearview left side  
August 5, 2014



Rearview middle  
August 5, 2014



Rearview right side  
August 5, 2014

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. 7 Comstock Circle			Policy Number:
City Carson City	State NV	ZIP Code 89703	Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



North side  
August 5, 2014



South side  
August 5, 2014



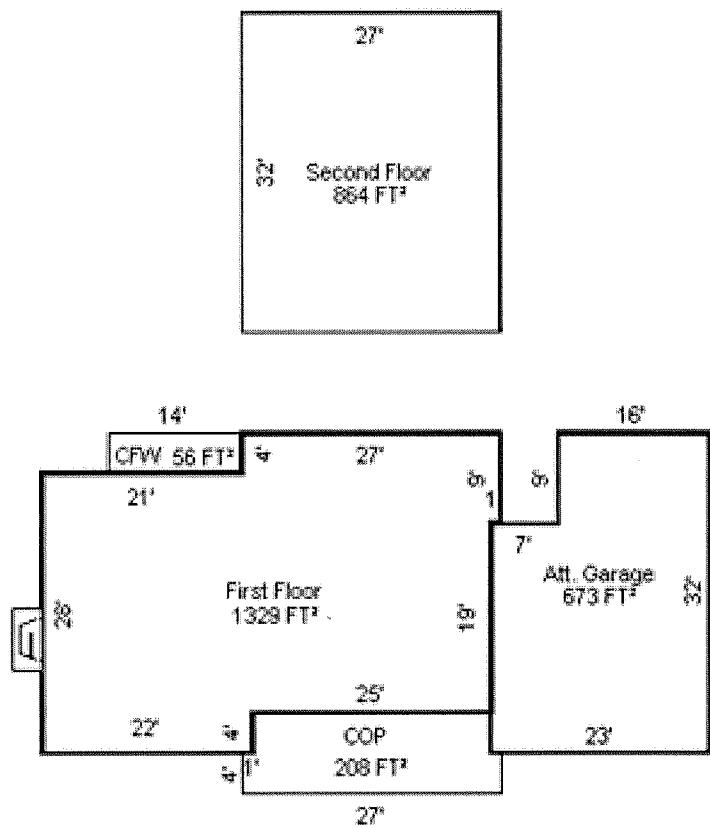
Vent at rear  
August 5, 2014



Vent at rear  
August 5, 2014

## ***Building Sketch***

Parcel Report: 00332109



Sketch by Apex IV/Windows™

Documentation for 2-Year PRP Eligibility Extension

If your property was newly designated in a Special Flood Hazard Area as a result of a flood map revision effective on or after October 1, 2008, please have your local community official complete the information below. Return this document to your insurance agent/company to determine if your property qualifies for this extension.



Property Owner: Dennis Pederson

Property Address: 7 Comstock Circle, Carson City NV 89703

Building Description:  Residential  Nonresidential

Prior Map Date: January 16, 2009

Prior Community Number, Map Panel & Suffix: 3200010091/92E

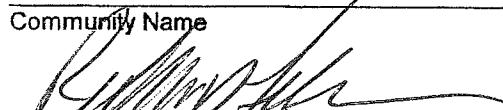
Prior Flood Zone: X-Shaded

Robert D Fellows

Name of Community Official

Carson City, Nevada

Community Name

  
Signature of Community Official

Floodplain Manager

Community Official Title

775-283-7370

Telephone Number

August 6, 2014

Date

Comments (optional):