

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 5.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:
BUILDING OWNER'S NAME	JEFFERY L. & CAROL A. SCOTT	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.	2583 SNYDER AVE	
CITY	STATE	ZIP CODE

CITY **CARSON CITY** STATE **NV** ZIP CODE **89701**

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
PARCEL L-2, PARCEL MAP 1594, APN 10-491-07

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use comments section if necessary.)
RESIDENTIAL

LATITUDE/ LONGITUDE (OPTIONAL) (#.# - #.# - #.#.#.# or #.#.###.#) SOURCE: GPS (Type: _____)
 USGS Quad Map Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER CITY OF CARSON CITY 320001	B2. COUNTY NAME INDEPENDENT CITY	B3. STATE NV			
B4. MAP AND PANEL NUMBER 320001-0175	B5. SUFFIX C	B6. FIRM INDEX DATE 10/16/96	B7. FIRM PANEL EFFECTIVE/REVISED DATE 9-30-93	B8. FLOOD ZONE(S) A 28	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 4644.2

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: _____)

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)

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.

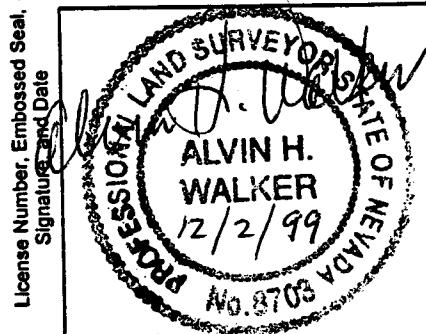
C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 4 and 5. If no diagram accurately represents the building, provide a sketch or photograph.)

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 NGVD 29 Conversion/Comments _____

Elevation reference mark used RM 27 Does the elevation reference mark used appear on the FIRM? Yes No

a) Top of bottom floor (including basement or enclosure) 4637 1 ft. (m)
 b) Top of next higher floor 4646 0 ft. (m)
 c) Bottom of lowest horizontal structural member (V zones only) 4637 1 ft. (m)
 d) Attached garage (top of slab) 4638 6 ft. (m)
 e) Lowest elevation of machinery and/or equipment servicing the building 4636 4 ft. (m)
 f) Lowest adjacent grade (LAG) 4636 4 ft. (m)
 g) Highest adjacent grade (HAG) 4636 4 ft. (m)
 h) No. of permanent openings (flood vents) within 1.0 ft. of LAG _____ sq. in. (sq. cm)
 i) Total area of all permanent openings (flood vents) in C3h _____ 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.

SIGNER'S NAME ALVIN H. WALKER LICENSE NUMBER PLS 8703

TITLE	COMPANY NAME
OWNER	AL WALKER, PLS
ADDRESS	CITY Minden STATE NV ZIP CODE 89423
SIGNATURE	DATE 12/2/99 TELEPHONE 775-267-3858

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.

Policy Number

2583 SNYDER AVE

CITY CARSON CITY

STATE

NV

ZIP CODE

89701

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

Check here if attachments

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

For Zones AO and A (without BFE), complete Items E1 through E3. 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 4 and 5. 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 _____ ft.(m) _____ in.(cm) _____ above or _____ below (check one) the highest adjacent grade.

E3. 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, and E for Zone A (without a 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. Check the applicable box(es) and sign below.

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.)

A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

The following information (Items G1-G6) is provided for community floodplain management purposes.

G1. PERMIT NUMBER	G2. DATE PERMIT ISSUED	G3. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G4. This permit has been issued for: New Construction Substantial Improvement

G5. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____

G6. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME TITLE

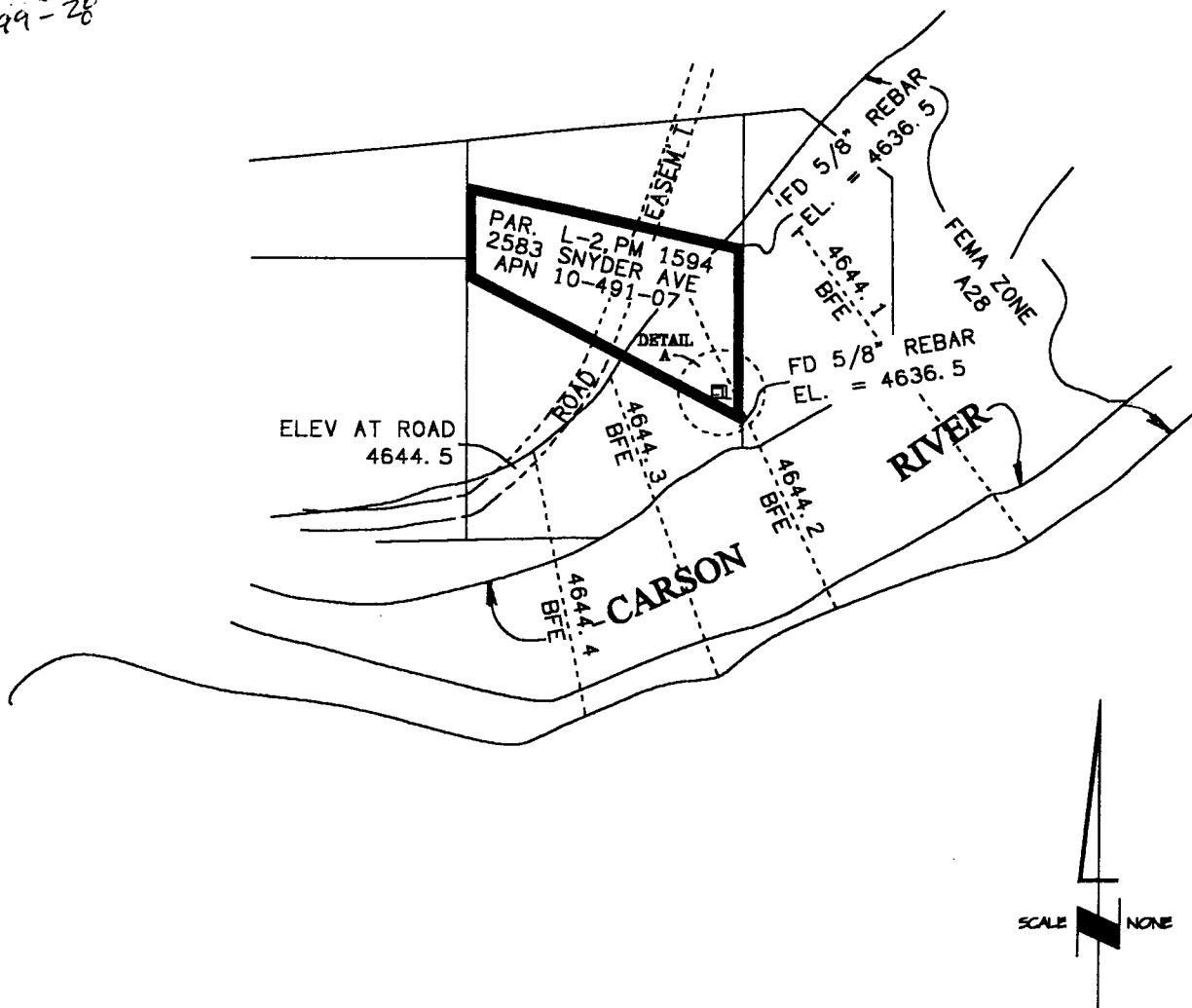
COMMUNITY NAME TELEPHONE

SIGNATURE DATE

COMMENTS

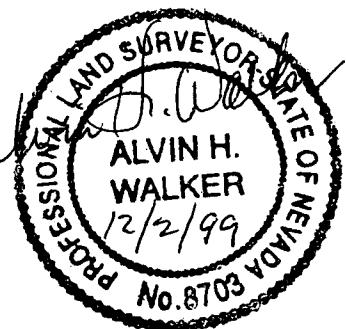
Check here if attachments

NO 13799-28
NW



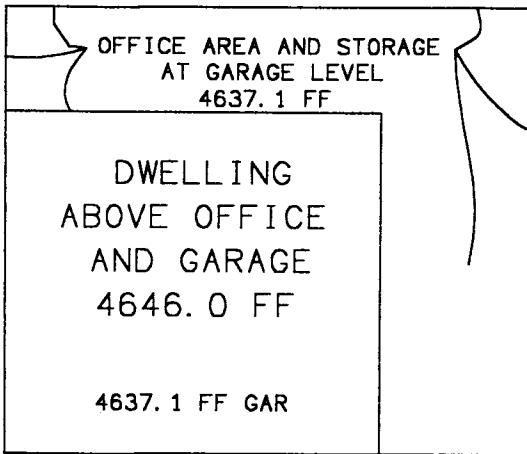
**LOCATION SKETCH
FOR
CARSON CITY
TO
SUPPORT AN
ELEVATION CERTIFICATE
AT
2583 SNYDER AVE.**

PREPARED BY:
AL WALKER, PLS
P. O. BOX 2372
MINDEN, NV 89423
PHONE: (775) 267-3858



4636. 4 NG
AT COR

35'



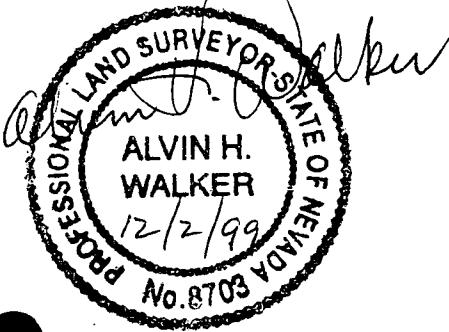
SCALE NONE

4644. 2
BFE

4636. 4 NG
AT COR

4636. 4 NG
AT COR

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**DETAIL SKETCH
FOR
CARSON CITY
TO
SUPPORT AN
ELEVATION CERTIFICATE
AT
2583 SNYDER AVE.**

SE COR PARCEL L-2
FD 5/8" REBAR
AND CAP
EL. = 4636. 5