

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

Form for Section A containing fields for Building Owner's Name (Dave Mickelsen), Building Street Address, City (Featherville), State (Idaho), ZIP Code (83647), Building Description, Building Use (Residential), and Horizontal Datum information.

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

Form for Section B containing fields for B1. NFIP Community Name & Community Number (Featherville 160212), B2. County Name (Elmore), B3. State (Idaho), B4. Map and Panel Number (160212D225), B5. Suffix (B), B6. Firm Index Date (Mar. 15, 99), B7. Firm Panel Effective/Revised Date (June 19, 1989), B8. Flood Zone (AE), B9. Base Flood Elevation (4434.0), and B10-B12 regarding datum and coastal barrier resources.

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

Form for Section C containing fields for C1. Building elevations based on (Building Under Construction), C2. Building Diagram Number (2), C3. Elevations - Zones A1-A30, AE, AH, A, VE, V1-V30, V, AR, ARIA, AR/AE, ARIA1-A30, ARIA/AH, ARIA/O, and a table of elevation reference marks with values like 4435.44, 4441.19, and 4439.11.



SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

Certification section containing text: '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.' and fields for Certifier's Name (James J. Howard), Title (Owner), Address (1530 E. Commercial), City (Meridian), State (Idaho), ZIP Code (83642), Signature, Date (8-8-05), and Telephone (1-208-846-8937).

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. <u>UNKNOWN</u>		Policy Number	
CITY <u>FEATHERVILLE</u>	STATE <u>Idaho</u>	ZIP CODE <u>83647</u>	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
AN Unattached Garage will be constructed at a future date, a separate Elevation Certificate will be Required at that time FOR THE GARAGE - NO EQUIPMENT IN CRAWL SPACE - Heating DUCTS will be supported from Floor Joist.

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 E5. 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 bottom floor (including basement or enclosure) of the building is _____ ft. (m) _____ 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 _____ ft. (m) _____ in. (cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is _____ ft. (m) _____ in. (cm) _____ above or _____ below (check one) the highest adjacent grade. (Use natural grade, if available.)
- E5. 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 _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

SIGNATURE _____ DATE _____ TELEPHONE _____

COMMENTS _____

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

Check here if attachments

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