

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		For Insurance Company Use:
BUILDING OWNER'S NAME <u>ZON FISHER</u>		Policy Number
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>530 E 12TH SOUTH</u>		Company NAIC Number
CITY <u>MOUNTAIN HOME</u>	STATE <u>IDAHO</u>	ZIP CODE <u>83647</u>
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>1/2 LOT 33 OF THE NORTH 1/2 OF SEC 36 SUBDIVISION</u>		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) <u>RESIDENTIAL</u>		
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.###" or ##.#####")	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER	B2. COUNTY NAME <u>ELMORE</u>	B3. STATE <u>IDAHO</u>
B4. MAP AND PANEL NUMBER <u>0605</u>	B5. SUFFIX <u>C</u>	B6. FIRM INDEX DATE <u>MAR. 15, 1994</u>
B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S) <u>AO</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>3123.00</u>

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)

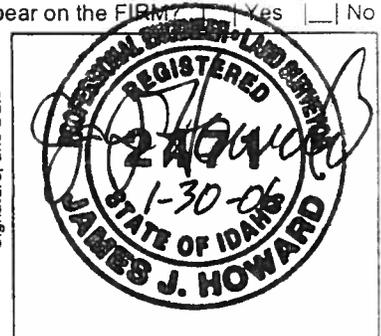
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 2 (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.)

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 C3.a-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 _____ Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>3121</u> . <u>21</u> ft.(m)
<input checked="" type="checkbox"/> b) Top of next higher floor	<u>3124</u> . <u>91</u> ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____ . _____ ft.(m)
<input checked="" type="checkbox"/> d) Attached garage (top of slab)	<u>3123</u> . <u>39</u> ft.(m)
<input checked="" type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.)	<u>3123</u> . <u>52</u> ft.(m)
<input checked="" type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	<u>3123</u> . <u>03</u> ft.(m)
<input checked="" type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	<u>3123</u> . <u>55</u> ft.(m)
<input checked="" type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>6</u>
<input checked="" type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h	<u>540</u> 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.

CERTIFIER'S NAME J. J. Howard LICENSE NUMBER 2471

TITLE OWNER COMPANY NAME J J HOWARD ENGINEERS

ADDRESS 1530 E. COMMERCIAL AVE SUITE 109 CITY MEDIDIAN STATE ID ZIP CODE 83642

SIGNATURE J. J. Howard DATE 1-30-06 TELEPHONE 876-8937

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>530 E 12TH SOUTH</u>		Policy Number	
CITY <u>MOUNTAIN HOME</u>	STATE <u>ID</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

|_| Check here if attachments

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 2 (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 2 ft. (m) 0 ft. (0 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) 0 ft. (0 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 <u>RON FISHER</u>			
ADDRESS <u>545 E 12TH S</u>	CITY <u>MOUNTAIN HOME</u>	STATE <u>ID</u>	ZIP CODE <u>83647</u>
SIGNATURE <u>Ronald L. Fisher</u>	DATE <u>1/31/06</u>	TELEPHONE <u>(208) 587-4705</u>	
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.

- 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 <u>Elmore County Building Permit</u>	G5. DATE PERMIT ISSUED <u>7/6/05</u>	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED <u>3/24/06</u>
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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

FEDERAL EMERGENCY MANAGEMENT AGENCY
ELEVATION FORM

O.M.B. NO. 3067-0147
Expires September 30, 2005

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 1 hour per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing, reviewing, and submitting the form. You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Federal Emergency Management Agency, 500 C Street, SW, Washington DC 20472, Paperwork Reduction Project (3067-0147). Submission of the form is required to obtain or retain benefits under the National Flood Insurance Program. **Please do not send your completed survey to the above address.**

This form must be completed for requests and must be completed and signed by a registered professional engineer or licensed land surveyor. **A FEMA National Flood Insurance Program (NFIP) Elevation Certificate may be submitted in addition to this form for single structure requests.**

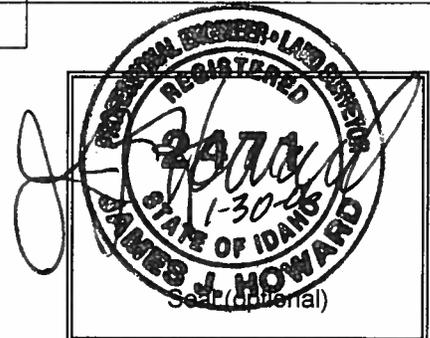
For requests to remove a structure on natural grade OR on engineered fill from the Special Flood Hazard Area (SFHA), submit the lowest adjacent grade (the lowest ground touching the structure), including an attached deck or garage. For requests to remove an entire parcel of land from the SFHA, provide the lowest lot elevation; or, if the request involves an area described by metes and bounds, provide the lowest elevation within the metes and bounds description.

1. NFIP Community Number: 160212 Property Name or Address: 530 E. 12TH SOUTH MOUNTAIN HOME, ID 83647
2. Are the elevations listed below based on existing or proposed conditions? (Check one)
3. What is the elevation datum? NGVD 29 If any of the elevations listed below were computed using a datum different than the datum used for the effective Flood Insurance Rate Map (FIRM) (e.g., NGVD 29 or NAVD 88), what was the conversion factor?
Local Elevation +/- ft. = FIRM Datum
4. For the existing or proposed structures listed below, what are the types of construction? (check all that apply)
 crawl space slab on grade basement/enclosure other (explain)
5. Has FEMA identified this area as subject to land subsidence or uplift? (see instructions) Yes No
If yes, what is the date of the current releveling? / (month/year)

Lot Number	Block Number	Lowest Lot Elevation	Lowest Adjacent Grade To Structure	Base Flood Elevation	For FEMA Use Only
<u>N/A</u>	<u>5/2 33</u>	<u>3123.02</u>	<u>3123.02</u>	<u>3123.00</u>	

This certification is to be signed and sealed by a licensed land surveyor, registered professional engineer, or architect authorized by law to certify elevation information. All documents submitted in support of this request are correct to the best of my knowledge. I understand that any false statement may be punishable by fine or imprisonment under Title 18 of the United States Code, Section 1001.

Certifier's Name: J. Howard License No.: 2471 Expiration Date: 3-31-07
Company Name: J. Howard Engs Telephone No.: 846-8937 Fax No.: 846-8822
Signature: J. Howard Date: 1-30-06





APPROXIMATE SCALE IN FEET
 1000 0 1000

NATIONAL FLOOD INSURANCE PROGRAM

FIRM
FLOOD INSURANCE RATE MAP

ELMORE COUNTY,
 IDAHO
 (UNINCORPORATED AREAS)

(SEE MAP INDEX FOR PANELS NOT PRINTED)

COMMUNITY-PANEL NUMBER
 160212 0605 C
 MAP REVISED:
 MARCH 15, 1994



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT Version 1.0. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. Further information about National Flood Insurance Program flood hazard maps is available at www.fema.gov/mit/foed.

