

# FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM ELEVATION CERTIFICATE

O.M.S. No. 3067-0077  
Expires July 31, 2002

Important: Read the Instructions on pages 1 - 7.

<b>SECTION A - PROPERTY OWNER INFORMATION</b>			For Insurance Company Use:
BUILDING OWNER'S NAME Ryder Homes of Nevada		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 37 Avenue De La Argent		Company NAIC Number	
CITY Lockwood	STATE Nevada	ZIP CODE 89440	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 37 Rainbow Bend Subdivision			
BUILDING USE (e.g. Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential			
LATITUDE/LONGITUDE (OPTIONAL) (###.###.### or ###.###)		HORIZONTAL DATUM: <input checked="" 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 _____

<b>SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION</b>					
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 320033 0030C		B2. COUNTY NAME Storey County		B3. STATE Nevada	
B4. MAP AND PANEL NUMBER 30 of 150	B5. SUFFIX C	B6. FIRM INDEX DATE 7/19/1993	B7. FIRM PANEL EFFECTIVE/REVISED DATE 7/19/1993	B8. FLOOD ZONE(S) AO	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) Depth 1
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe): _____					
B11. Indicate the elevation datum used for the BFE in B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe): _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____					

<b>SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)</b>	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.	
C2. Building Diagram Number <u>3</u> (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/AC 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 <u>0</u> Conversion/Comments _____ Elevation reference mark used: <u>RM</u> Does the elevation reference mark used appear on the FIRM? <input type="checkbox"/> No	
<input checked="" type="checkbox"/> a) Top of bottom floor (including basement or enclosure) (Crawl Spc) 4355 6 ft. (m)	
<input type="checkbox"/> b) Top of next higher floor (Finish Floor) 4358 1 ft. (m)	
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only) _____ ft. (m)	
<input type="checkbox"/> d) Attached garage (top of slab) 4357 1 ft. (m)	
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment (Air Conditioner servicing the building (Describe in a Comments area.) 4357 0 ft. (m)	
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG) 4356 1 ft. (m)	
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG) 4356 8 ft. (m)	
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade <u>11</u>	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h <u>1109</u> sq. in. (sq. cm)	

<b>SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION</b>			
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 Raymond R. Hebert	LICENSE NUMBER PLS 6630		
TITLE Associate, Surveying & Mapping	COMPANY NAME Stantec Consulting Inc.		
ADDRESS 6980 Sierra Center Parkway	CITY Reno	STATE NV	ZIP CODE 89511
SIGNATURE 	DATE 8/16/2001	TELEPHONE (775) 850-0777	