

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3087-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

SECTION A - PROPERTY OWNER INFORMATION		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. BOX, PO BOX NO. 272 Rue de la Fauve		Company NAIC Number
CITY Lockwood	STATE Nevada	ZIP CODE 89440
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 272 Rainbow Bend		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc.) Use Comments section if necessary. Residential		
LATITUDE/LONGITUDE (OPTIONAL) (<i>100-50-100.000</i> or <i>000.000000</i>)	HORIZONTAL DATUM <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Typical) <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

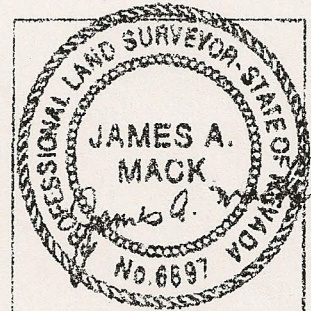
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 320033 0030C		B2. COUNTY NAME Storey County		B3. STATE Nevada	
B4. MAP AND PANEL NUMBER 3C of 150	B5. SUFFIX C	B6. FIRM INDEX DATE 7/19/1993	B7. FIRM PANEL EFFECTIVE/REVISED DATE 7/19/1993	B8. FLOOD ZONE(S) AO	B9. BASE FLOOD ELEVATION(S) (Zone AO use depth of flooding) 1 ft. Depth.

- 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 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 8 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) Diagram 8
- C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARVA, ARVAE, ARVA1-A30, ARIAH, ARIAQ
 Complete items C3a-f 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 C, as appropriate, to document the datum conversion.
 Datum 0 Conversion/Comments
 Elevation reference mark used: RM1 Does the elevation reference mark used appear on the FIRM? Yes No
- a) Top of bottom floor (including basement or enclosure) 4350.9 ft(m)
 - b) Top of next higher floor _____ ft(m)
 - c) Bottom of lowest horizontal structural member (V zones only) _____ ft(m)
 - d) Attached garage (top of slab) 4350.1 ft(m)
 - e) Lowest elevation of machinery and/or equipment servicing the building _____ ft(m)
 - f) Lowest adjacent grade (LAG) 4349.4 ft(m)
 - g) Highest adjacent grade (HAG) 4349.8 ft(m)
 - h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 14 ea.
 - i) Total area of all permanent openings (flood vents) in sq. ft. (sq. cm) 1,176 sq. in.

License Number, Embossed Seal, Signature, and Date



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 James A. Mack	LICENSE NUMBER
TITLE Project Surveyor	COMPANY NAME Stantec Consulting Inc.
ADDRESS 950 Industrial Way	CITY Sparks
SIGNATURE	STATE NV
DATE 4/6/2001	ZIP CODE 89431
	TELEPHONE (775) 358-6931