Check here if attachments.	
	Comments (including type of equipment and location, per C2(e), if applicable)
	Signature
	Community Name Telephone
	Local Official's Name
t meters Datum	G10. Community's design flood elevation:
meters Datum	G9. BFE or (in Zone AO) depth of flooding at the building site:
meters Datum	GB. Elevation of as-built lowest floor (including basement) [] feet of the building:
	G7. This permit has been issued for. New Construction Substantial Improvement
Date Certificate of Compilance/Occupancy Issued	G4. Permit Number G5. Date Permit Issued G6. G6.
ent purposes.	G3. The following information (Items G4–G10) is provided for community floodpiain management purposes
A-Issued or community-issued BFE)	G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or or Zone AO.
nd sealed by a licensed surveyor, ne source and date of the elevation	G1. The information in Section C was taken from other documentation that has been signed and sealed by engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and data in the Comments area below.)
inagement ordinance can complete n below. Check the measurement	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. Check the measurement used in items G8–G10. In Puerto Rico only, enter meters.
	SECTION G - COMMUNITY INFORMATION (OPTIONAL)
Company NAIC Number	City State ZIP Code ZIP Code Tues On 34293
Policy Number:	Building Street Address (Including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No.
FOR INSURANCE COMPANY USE	IMPORTANT: In these spaces, copy the corresponding information from Section A.
OMB No. 1660-0008 Expiration Date: November 30, 2018	ELEVATION CERTIFICATE

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency. Management Agency National Flood insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

700 12112C-03/4 B4. Map/Panel Number レフ・ナ 44 Şī Şī A2. Building Street Address (Including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Reute and Box No. **B**11. B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: A7. Building Diagram Number A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A3. Property Description (Lot and Block Numbers, Tax Percel Number, Legal Description, etc.) A1. Building Owner's Name **B1. NFIP Community Name & Community Number** A9. For a building with an attached garage: A8. For a building with a crawlspace or enclosure(s): B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? [Yes 왕 Latitude/Longitude: b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade a) Square footage of attached garage c) Total net area of flood openings in A8.b Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade d) Engineered flood openings? c) Total net area of flood openings in A9.b d) Engineered flood openings? a) Square footage of crawispace or enclosure(s) Indicate elevation datum used for BFE in Item B9: NGVD 1929 ☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other/Source: なった Carrectus *** B5. Suffix Lat. 27 0 20. 27 1 Long. 62 24 0 . 26 W Horizontal Datum: NAD 1927 SECTION A - PROPERTY INFORMATION to proves SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION 1/00/ B6. FIRM Index Date ☐ Yes ☐ Yes - Joseph DOVE 521 Saparese 公司 44 B7. FIRM Panel Effective/ Revised Date 104/2016 OPA B2. County Name State 100 sq in sq ft sq in GAR **WAYD 1988** B8. Flood Zone(s) 7 Pripari 14 B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) Other/Source: FOR INSURANCE COMPANY USE Company NAIC Number ひみとな ZIP Code Policy Number 7 W B3. State H NAD 1983 Š

OMB No. 1660-0008 Expiration Date: November 30, 2018

Check here if attachments.			
			Comments
Telephone	Te	Date	Signature
State ZIP Code	St	City	Address
one A (without a FEMA-Issued or rect to the best of my knowledge.	ions A, B, and E are con	Ine 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. The statements in Sections A, B, and E are correct to the best of my knowledge Property Owner or Owner's Authorized Representative's Name	Property Owner or Owner's Authorized Representative Who community-Issued BFE) or Zone AO must sign here. The state
ERTIFICATION	EPRESENTATIVE) CE	SECTION F PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION	SECTION F I
cordence with the community's certify this information in Section G.	om floor elevated in acc The local official must o	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?	E5. Zone AO only: If no flood depth no floodplain management ordinance
rs above or below the HAG.		/or equipment	E4. Top of platform of machinery and/or equipment servicing the building is
rs above or below the HAG.	_ ☐ feet ☐ meters		E3. Attached garage (top of slab) is
9 (see pages 1–2 of instructions), is above or below the HAG.	ction A Items 8 and/or	For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages the next higher floor (elevation C2.b in the diagrams) of the building is	E2. For Building Diagrams 6-9 with put the next higher floor (elevation C2 the diagrams) of the building is
rs	_ ☐ feet ☐ meters	basement,	b) Top of bottom floor (including basement crawispace, or enclosure) is
r the elevation is above or below	baxes to show whether	 E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (Including basement, 	E1. Provide elevation information for the following the highest adjacent grade (HAG) and the ical provides a) Top of bottom floor (including basement,
n LOMA or LOMR-F request, ment used. In Puerto Rico only,	s intended to support a e. Check the measurer	For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B,and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.	For Zones AO and A (without BFE), cocomplete Sections A, B, and C. For Itel enter meters.
REQUIRED)	TION (SURVEY NOT NITHOUT BFE)	SECTION E BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)	SECTION E -
Company NAIC Number	ZIP Code	State	
Policy Number:	Route and Box No.	Building Street Address (Including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No.	Building Street Address (including Apt.
FOR INSURANCE COMPANY USE		IMPORTANT: In these spaces, copy the corresponding information from Section A.	IMPORTANT: in these spaces, copy
Expiration Date: November 30, 2018			ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.	ELEVATION CERTIFICATE
copy the corresponding infi	TE See ins
ormation from Section A.	See instructions for Item A6.

IMPORTANT: in Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 700 りたく

State

ZIP Code

Policy Number: FOR INSURANCE COMPANY USE Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View", and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page. 9 34293

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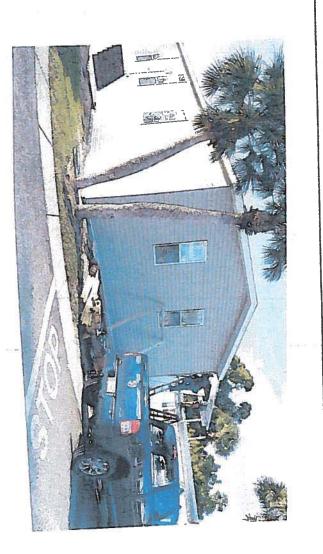


Photo One Caption

Clear Photo One

DATED 01/00/2020

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Clear Photo Two

FEMA Form 086-0-33 (7/15) Photo Two Caption

Replaces all previous editions.

Form Page 5 of 6

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

₹ IMPORTANT: in these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 700 レンプ State ZIP Code 34283 Policy Number: Company NAIC Number FOR INSURANCE COMPANY USE

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

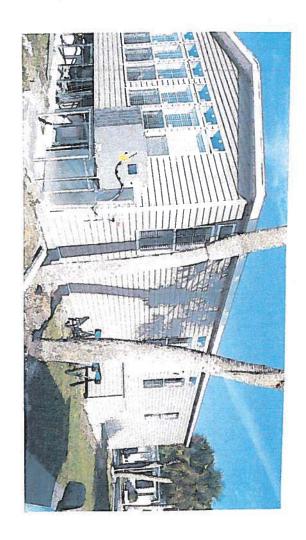
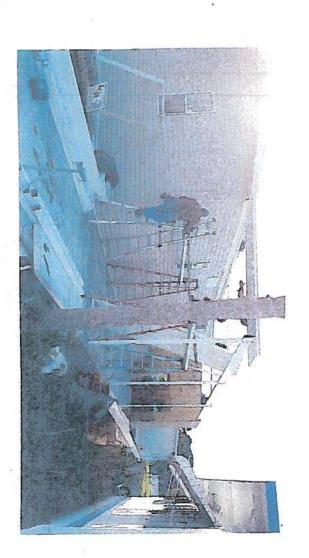


Photo Three

Photo Three Caption

2000

Clear Photo Three



01/00/2020

1500 Photo Four ところ

Clear Photo Four

FEMA Form 086-0-33 (7/15) Photo Four Caption

Replaces all previous editions.

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