

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:	
BUILDING OWNER'S NAME Mr. Rusty Welch		Policy Number	
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 95 Mayhurst Ave.		Company NAIC Number	
CITY Colorado Springs	STATE CO	ZIP CODE 80906	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) R Residential			
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-##" or ##.####)		HORIZONTAL DATUM: SOURCE	
		<input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 <input type="checkbox"/> GPS (Type): <input checked="" type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

31. NFIP COMMUNITY NAME & COMMUNITY NUMBER Colorado Springs	32. COUNTY NAME El Paso	33. STATE Colorado
34. MAP AND PANEL NUMBER 080041C0736	35. SUFFIX F	36. FIRM INDEX DATE March 17, 1997
37. FIRM PANEL EFFECTIVE/REVISED DATE	38. FLOOD ZONE(S) A	39. BASE FLOOD ELEVATION(S) Zone A0, use depth of flooding 6190
310. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in 39. <input checked="" type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other Describe:		
311. Indicate the elevation datum used for the BFE in 39: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other Describe:		
312. 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:		

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

01. 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.

02. Building Diagram Number 7 (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.)

03. 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 C3a-i below according to the building diagram specified in item 02. 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 NGVD1929 Conversion/Comments

Elevation reference mark used FIMS 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>6194</u>	<u>5 ft. (ft)</u>
<input type="checkbox"/> b) Top of next higher floor	<u>6203</u>	<u>5 ft. (ft)</u>
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>6202</u>	<u>5 ft. (ft)</u>
<input type="checkbox"/> d) Attached garage (top of slab)	<u>6194</u>	<u>0 ft. (ft)</u>
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>6194</u>	<u>5 ft. (ft)</u>
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>6194</u>	<u>0 ft. (ft)</u>
<input type="checkbox"/> g) Highest adjacent grade (HAG)	<u>6201</u>	<u>0 ft. (ft)</u>
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>2</u>	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	<u>2</u> sq. ft. sq. cm	

Signature: [Signature] License Number, Expiration Date, and Title: B-800 Lic.

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. B. Johnson	LICENSE NUMBER B-800
TITLE President	COMPANY NAME BECKER-JOHNSON, INC.
ADDRESS 2601 Platte Place	CITY Colorado Springs
SIGNATURE	STATE CO
DATE 8-2-00	ZIP CODE 80909
	TELEPHONE 719-473-5653

CITY, IN THESE SPACES, COPY THE CORRESPONDING INFORMATION FROM SECTION A. MAIN STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.), OR P.O. ROUTE AND BOX NO. 95 Mayhurst Ave.		For Insurance Company Use: Policy Number
COLORADO SPRINGS	STATE Colorado	ZIP CODE 80906
		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 E3. 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 7 (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 4 ft.(m) 6 in.(cm) above or below (check one) the highest adjacent grade.
- E3. 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, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME
Rusty Welch

ADDRESS 95 Mayhurst Ave. CITY Colorado Springs STATE Colorado ZIP CODE 80906

SIGNATURE _____ DATE _____ TELEPHONE 719-578-0333

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 E1, and G of this Elevation Certificate. Complete the applicable items 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 _____

G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of 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