DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

ELEVATION CERTIFICATE

OMB Control Number: 1660-0008 **IMPORTANT:** FOLLOW THE INSTRUCTIONS ON PAGES 9-16 Expiration: 11/30/2018 Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. FORM INSURANCE COMPANY USE SECTION A - PROPERTY INFORMATION A1. Building Owner's Name Policy Number: Shirley Allman A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Box No. Number: #33 Road 2929 State Zip Code 87410 City Aztec A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 9, Villa de Animas Subdivision A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) _Long._-107.9840W Horizontal Datum: A5. Latitude/Longitude: Lat. 36.8492N X NAD 1983 NAD 1927 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number A8. For a building with a crawlspace or enclosure(s): A9. For a building with an attached garage: a) Square footage of attached garage sq ft a) Square footage of crawlspace or enclosure(s) sa ft 2.384 b) Number of permanent flood openings b) Number of permanent flood openings in the in the attached garage within 1.0 foot crawlspace or enclosure(s) within 1.0 foot above adjacent grade above adjacent grade c) Total net area of flood openings in A9.b c) Total net area of flood openings in A8.b sq in sa in Nο d) Engineered flood openings? d) Engineered flood openings? SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number **B2.** County Name B3. State San Juan NM San Juan County 350064 B9. Base Flood Elevation(s) **B7. FIRM Panel Effective/** B8. Flood Zone(s) B4. Map/Panel Number B5. Suffix B6. FIRM Index Date (Zone AO, use base flood Revised Date 0730 depth 8/5/2010 Not Determined B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: FIS Profile (X) FIRM Community Determined (Other/Source: B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? CBRS C OPA **Designation Date:** SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) X Finished Construction Building Under Construction* C1. Building elevations are based on: Construction Drawings* C2. 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 C2.a -h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. A new Elevation Certificate will be required when construction of the building is complete. WGS 1984 Vertical Datum: Benchmark Utilized: WGS 1984 X NAVD1988 Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 Other/Source: Check the measurement used. Datum used for building elevations must be the same as that used for the BFE. 55 5642 a) Top of bottom floor (including basement, crawlspace, or enclosure floor) jeet meters 25 5644 meters feet b) Top of the next higher floor N/A meters Bottom of the lowest horizontal structural member (V Zones only) N/A meters d) Attached garage (top of slab) 5643 e) Lowest elevation of machinery or equipment servicing the building 40 meters (Describe type of equipment and location in Comments) 5643 30 meters f) Lowest adjacent (finished) grade next to building (LAG) 87 g) Highest adjacent (finished) grade next to building (HAG) meters h) Lowest adjacent grade at lowest elevation of deck or stairs, including 41 5643 meters structural support

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SEC	TION D - SURVEYOR, E	NGINEER.	OR ARCHITECT	CERTIFICA	TION	
This certification is to be signed and se hat the information on this Certificate re	aled by a land surveyor,	engineer, o	r architect author	ized by law to	certify elevation	
ounishable by fine or imprisonment und	ler 18 U.S. Code, Section	1 1001.				
Check here if attachments.	Were latitude provided by a		ide in Section A ind surveyor?		Vaga	Fo
Certifier's Name		License Number 6580			1	Tho a
Robert A. Echols, Jr., P.E.			80		18	9 12
itle Vice President		Company Name Chency-Walters-Echols, Inc.			650 3P2	
Address 909 West Apache	City Farmington	City State NM				318WK
Signature	Date 03/23/16		Telephone (505) 327-3303			
Copy both sides of this Elevation Certific				ompany, and	(3) building owne	r.
Comments (including type of equipment	it and location, per C2(e)	, if applicat	ole)"			
Sanatura					Date	a
Signature SECTION E - BUILDING ELEVAT	TON INFORMATION (CI	IDVEV NO	T DECLUBED) E	OD ZONE A		
 Provide elevation information for the highest adjacent grade (HAG) and the a) Top of bottom floor (including bath or enclosure) is 	he lowest adjacent grade			et C meters		X below the HAG.
 b) Top of bottom floor (including ba or enclosure) is 	sement, crawlspace,	5642	S	Cmeters	above or	below the LAG.
2. For Building Diagrams 6 -9 with perigher floor (elevation C2.b in the diagr		orovided in 5 5644	Section A Items	and/or 9 (see	ee pages 8 -9 of li ers above or	nstructions), the next below the HAG.
3. Attached garage (top of slab) is		N/A		C meters	above or	Obelow the HAG.
4. Top of platform of machinery and /o ervicing the building is	or equipment					Soelow the HAG.
5. Zone AO only: If no flood depth nurnanagement ordinance?	mber is available, is the to					munity's floodplain
SECTION F	- PROPERTY OWNER (
he property owner or owner's authoriz ommunity-issued BFE) or Zone AO m	ust sign here. The staten	nents in Se	ections A, B, and ctions A, B, and	E for Zone / E are correct	A (without a FEM/ to the best of my	A-issued or knowledge.
Property Owner or Owner's Authorized	Representative's Name:					
Address	City		Stat	е	ZIP	Code
Signature	Date		Telephone			
Comments						
Owner intends to construct an open	n 4-sided canopy over existin	ig concrete sl	ab. Slab is current	ly utilized for f	abrication and stora	ge of trusses.
						0
					Che	ck here if attachments

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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. Check the measurement used in Items G8 - G10. In Puerto Rico only, enter meters.							
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by 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 -G10) is provided for community floodplain management purposes.							
G4. Permit Number	G5. Date Permit	Issued	G6. Dat	te Certificate	of Compliance/	Occupancy Issued	
G7. This permit has been issued for:	New Construction (S	ubstantial Impro	vement				
G8. Elevation of as-built lowest floor (incle of the building:	uding basement)		Cfeet	C meters	Datum		
G9. BFE or (in Zone AO) depth of flooding	at the building		Cfeet	meters	Datum		
site:			0	0	Datum		
G10. Community's design flood elevation: Local Official's Name		Title	feet	meters_	_Datom		
Community Name		Telephone					
Signature		Date					
Comments							
				c			
				75			
			-			neak hara if attachments	
						neck here if attachments.	

BUILDING PHOTOGRAPHS

See instructions for Item A6

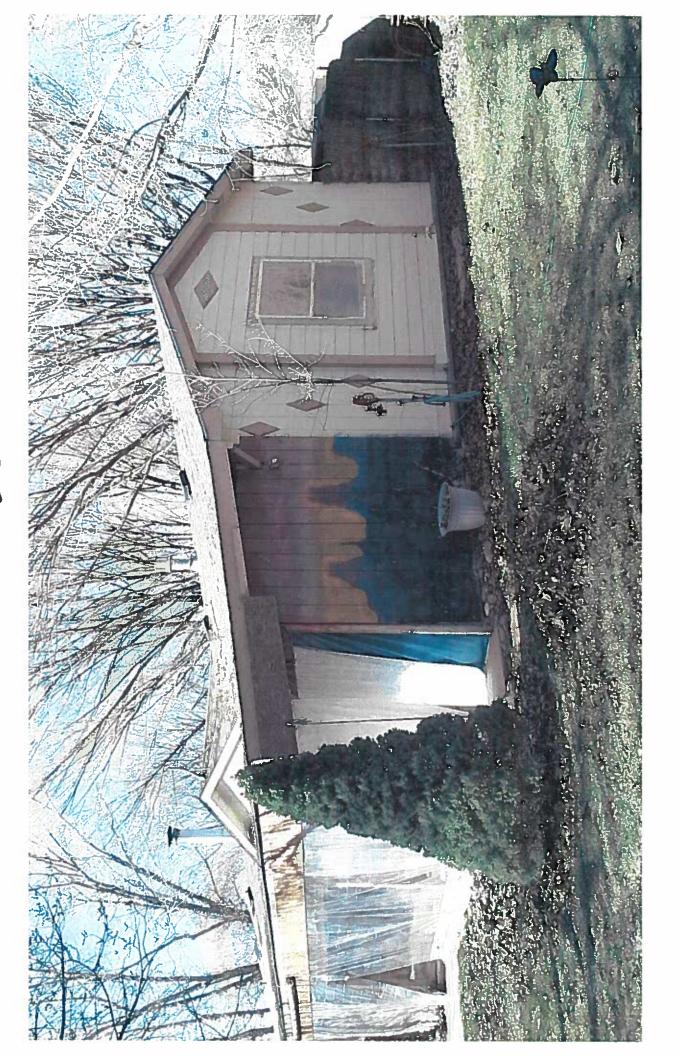
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IMPORTANT: In these spaces, copy the corres	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite #33 Road 2929	Policy Number:		
City Aztec	State NM	Zip Code 87410	Company NAIC Number:

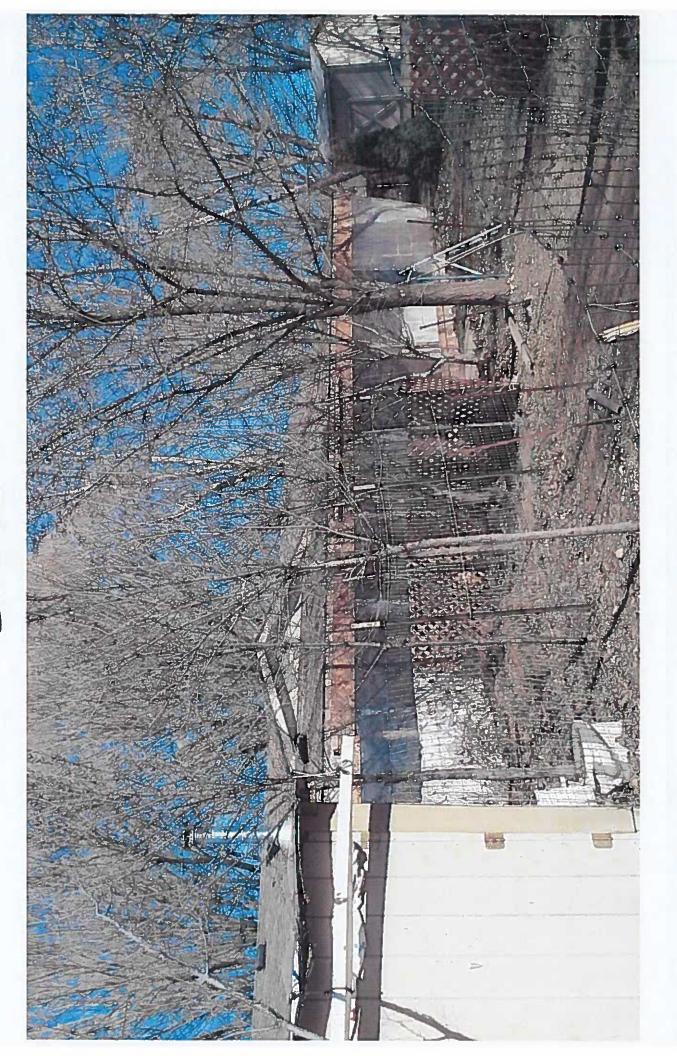
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front view" and Rear view"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs 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.

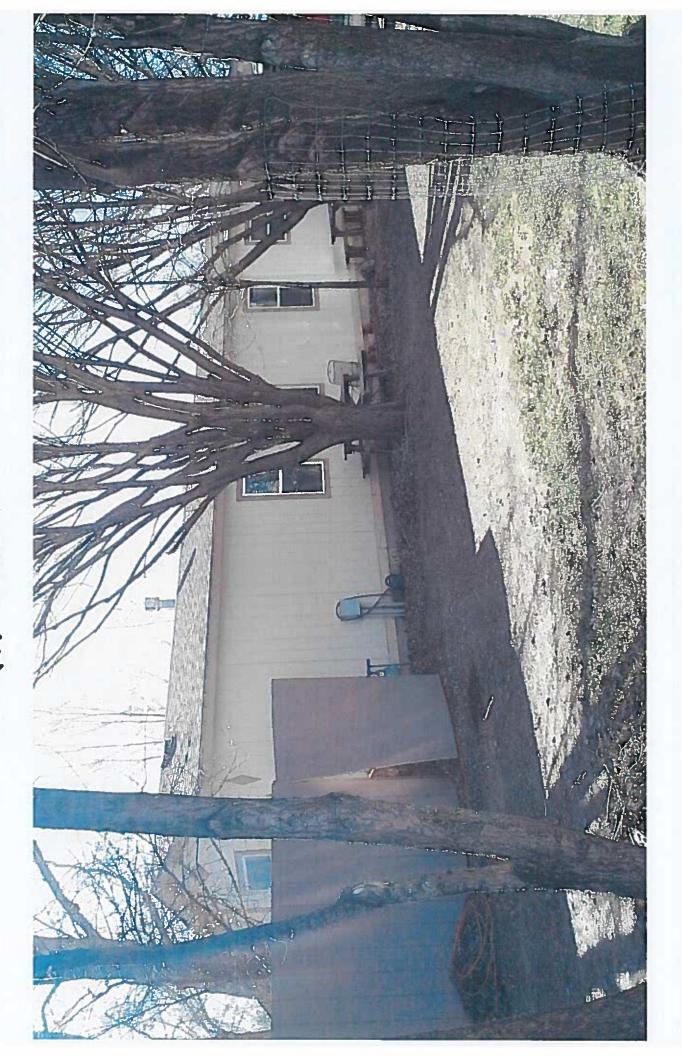
Four (4) photographs - North, South, East and West

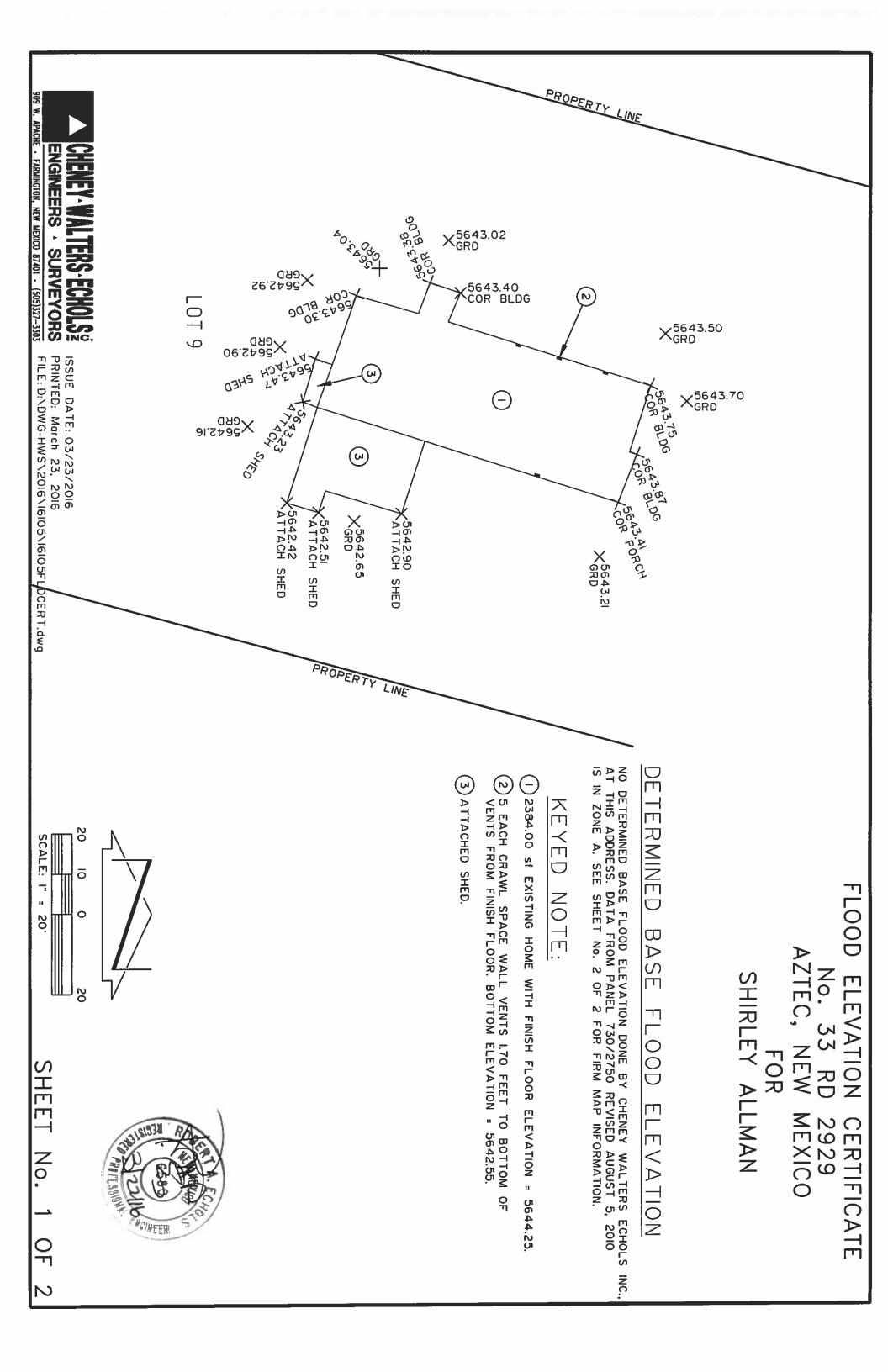
BUILDING PHOTOGRAPHS OMB Control Number: 1660-0008 **Continuation Page** Expiration: 11/30/2018 FORM INSURANCE COMPANY USE IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O.Route and Box No. Policy Number: City Company NAIC Number: State Zip Code 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.



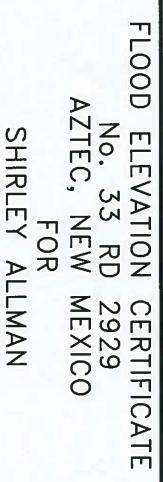


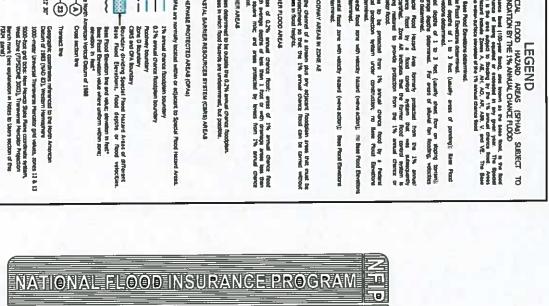












FIRM

PANEL 0730F

FLOOD INSURANCE RATE MAP

SAN JUAN COUNTY,
NEW MEXICO
AND INCORPORATED AREAS

PANEL 730 OF 2750

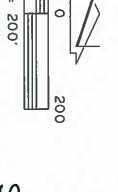
NATIONAL FLOOD INSURANCE PROGRAM

Notice to User: The Map Muniture shave below should be used when pucking map orders, the Community Number where observe anduct be used on thrust except applications for the subject quantitative?

MAP NUMBER 35045C0730F

Federal Emergency Management Agency

EFFECTIVE DATE AUGUST 5, 2010





SHEET No. 2 유