

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008
Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Mark and Victoria Sutherland	FOR INSURANCE COMPANY USE Policy Number: Company NAIC Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1888 Garst Lane City Ojai State CA ZIP Code 93023	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) APN 014-0-090-835	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential, condensers, and pool equipment</u>	
A5. Latitude/Longitude: Lat. <u>N 34 27'57"</u> Long. <u>W 119 11'56"</u>	
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983	
A7. Building Diagram Number <u>1B</u>	
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u> c) Total net area of flood openings in A8.b <u>N/A</u> sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <u>N/A</u>	
A9. For a building with an attached garage: a) Square footage of attached garage <u>N/A</u> sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u> c) Total net area of flood openings in A9.b <u>N/A</u> sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <u>N/A</u>	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number Ventura County (Unincorp. Areas) 060413		B2. County Name Ventura County		B3. State CA	
B4. Map/Panel Number 06111C0580 <u>0580 of 1275</u>	B5. Suffix E	B6. FIRM Index Date 1/20/10	B7. FIRM Panel Effective/Revised Date 1/20/10	B8. Flood Zone(s) AO	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 3.0 ft
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date: <u>N/A</u> <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

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. 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.
Benchmark Utilized: VCBM 83-21 Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: _____
Datum used for building elevations must be the same as that used for the BFE.

		Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>1071.45</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>1076.31</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>1063.47</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>1067.45</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters

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 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.

☒ Check here if comments are provided on back of form.
☒ Check here if attachments.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

Certifier's Name Larry J. Frager

License Number LS 7998

Resident

Company Name Benner and Carpenter

Address 506 East Main St

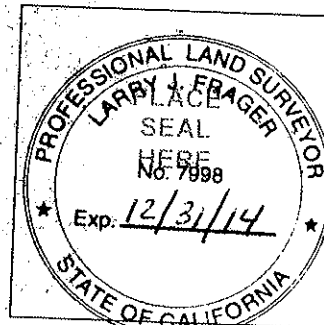
City Santa Paula

State CA ZIP Code 93060

Signature Larry Frager

Date 2/15/13

Telephone 805-525-3396



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.
1888 Garst Lane

City Ojai

State CA

ZIP Code 93023

FOR INSURANCE COMPANY USE

Policy Number

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 Item C2e equipment: Condenser Units #1 and #2 During construction it was necessary to move both condensers to a new location off the NE corner of the building. EG at this location is 1071.83 and the elev. of the bottom of the condenser is 1076.31 a difference of 4.48'. Pool equip. is at elev. 1054.03' and the elev. of the EG is at 1049.98 a difference of 4.05'. During construction it was necessary to move the pool equip. south of where it was originally shown

Signature

Larry Frager

Date 2/15/13

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

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.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is 4.0 ☒ feet ☐ meters ☒ above or ☐ below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is 8.0 ☒ feet ☐ meters ☒ above or ☐ below the LAG.
- E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is N/A ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E3. Attached garage (top of slab) is N/A ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is 4.48 ☒ feet ☐ meters ☒ above or ☐ below the HAG.
- E5. 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. **FLOOD DEPTHS KNOWN - 3.0 FT**

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. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name Larry J. Frager

Address 506 East Main Street

City Santa Paula

State CA

ZIP Code 93060

Signature

Larry Frager

Date 2/15/13

Telephone 805-525-3396

Comments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

☒ Check here if attachments.

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

FP 2011-04

G5. Date Permit Issued

03/31/2011

G6. Date Certificate Of Compliance/Occupancy Issued

02/19/2013

G7. This permit has been issued for:

☒ New Construction

☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: 1071.45

☒ feet ☐ meters

Datum NAVD 1988

G9. BFE or (in Zone AO) depth of flooding at the building site: 3.0

☒ feet ☐ meters

Datum NAVD 1988

G10. Community's design flood elevation:

☒ feet ☐ meters

Datum NAVD 1988

Local Official's Name

Brian Trushinski

Title

Floodplain Manager

Community Name

Kentura County (Unincorporated Areas)

Telephone

(805) 477-1967

Signature

Date

02/19/2013

2nd floor finished floor is elevated 1'-0" above HAG + 3.0 Depth. Bottom of lowest utility/service is 1076.31 ft. NAVD 1988 which is 6.86 ft. above the 3.0 ft. Depth (BFE). ☐ Check here if attachments.

Building Photographs

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) & P.O. Route and Box No.

1888 Garst Lane

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Ojai

State

CA

ZIP Code

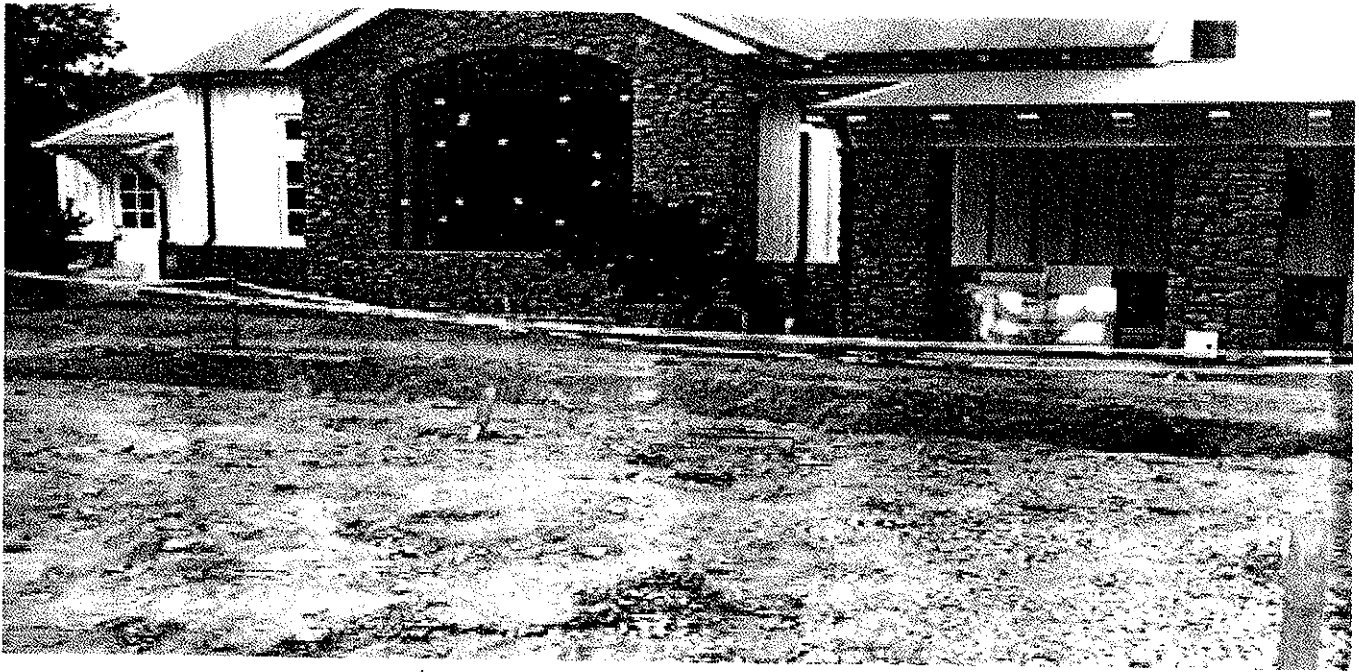
93023

FOR INSURANCE COMPANY USE

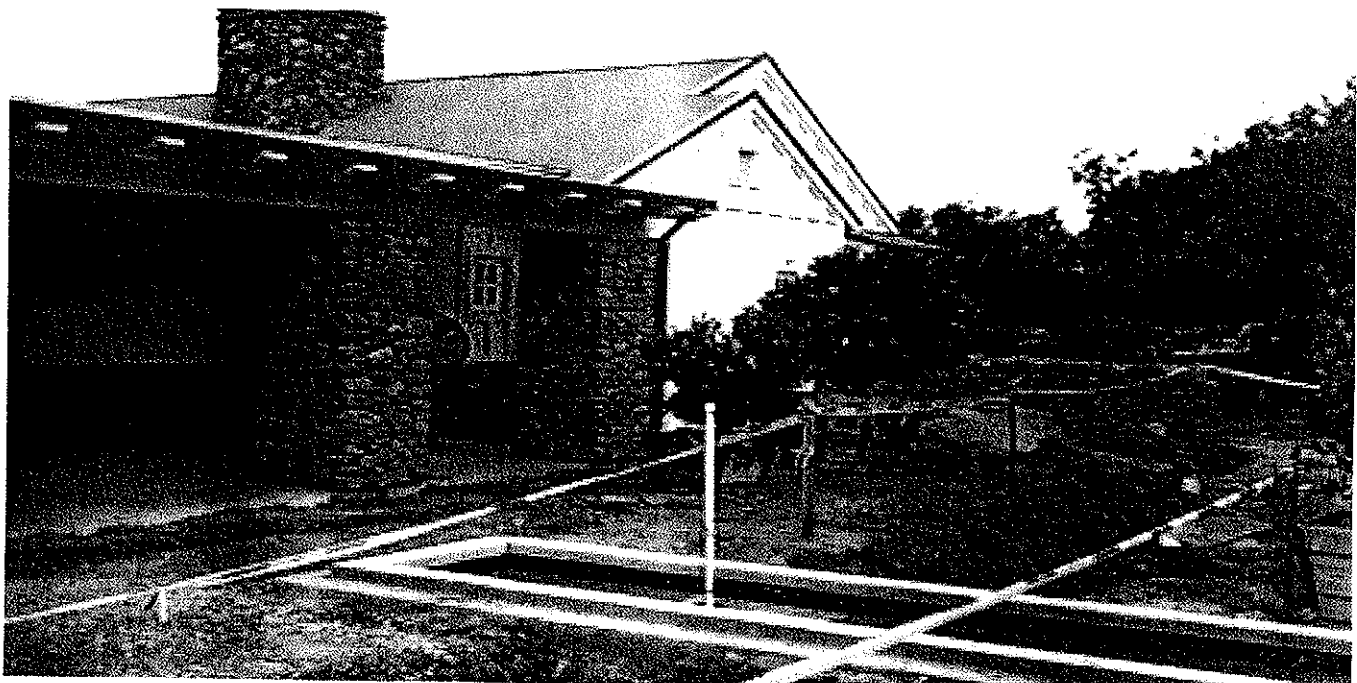
Policy Number:

Company NAIC Number:

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 lined openings or vents, as indicated in Section A8.



North - North East



North - North West

Building Photographs

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.

FOR INSURANCE COMPANY USE

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Policy Number:

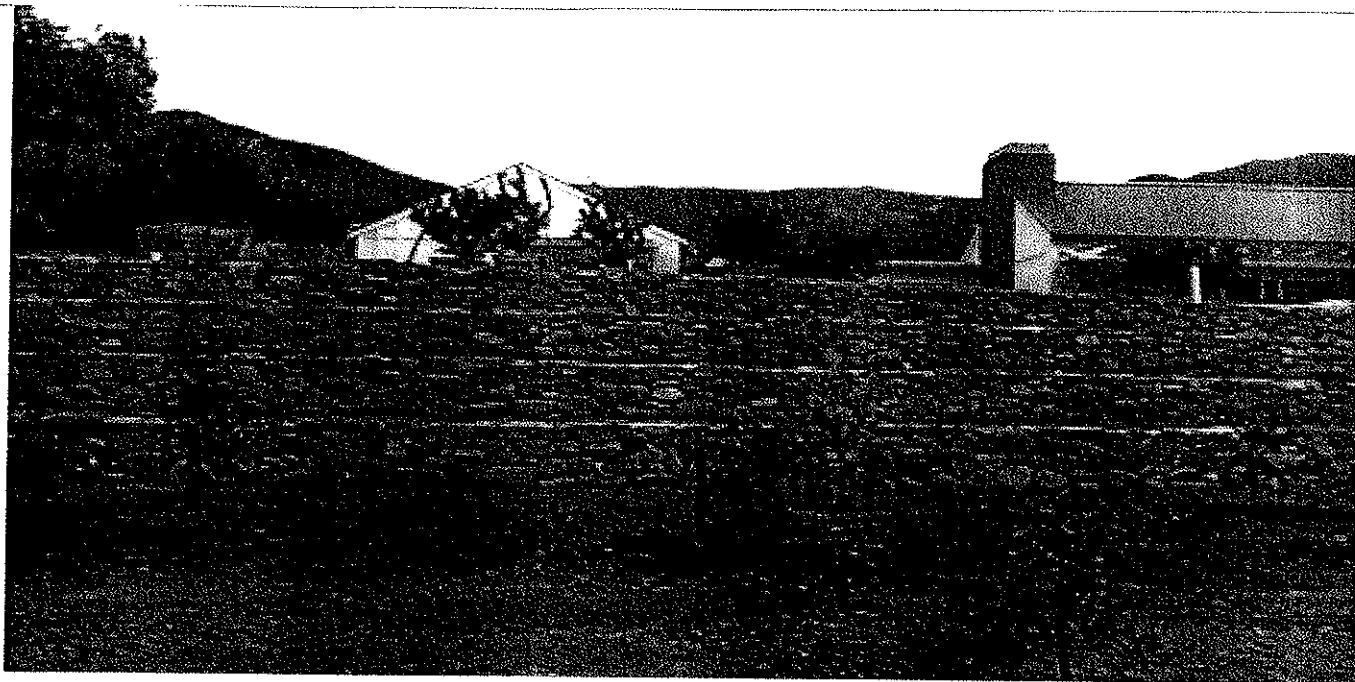
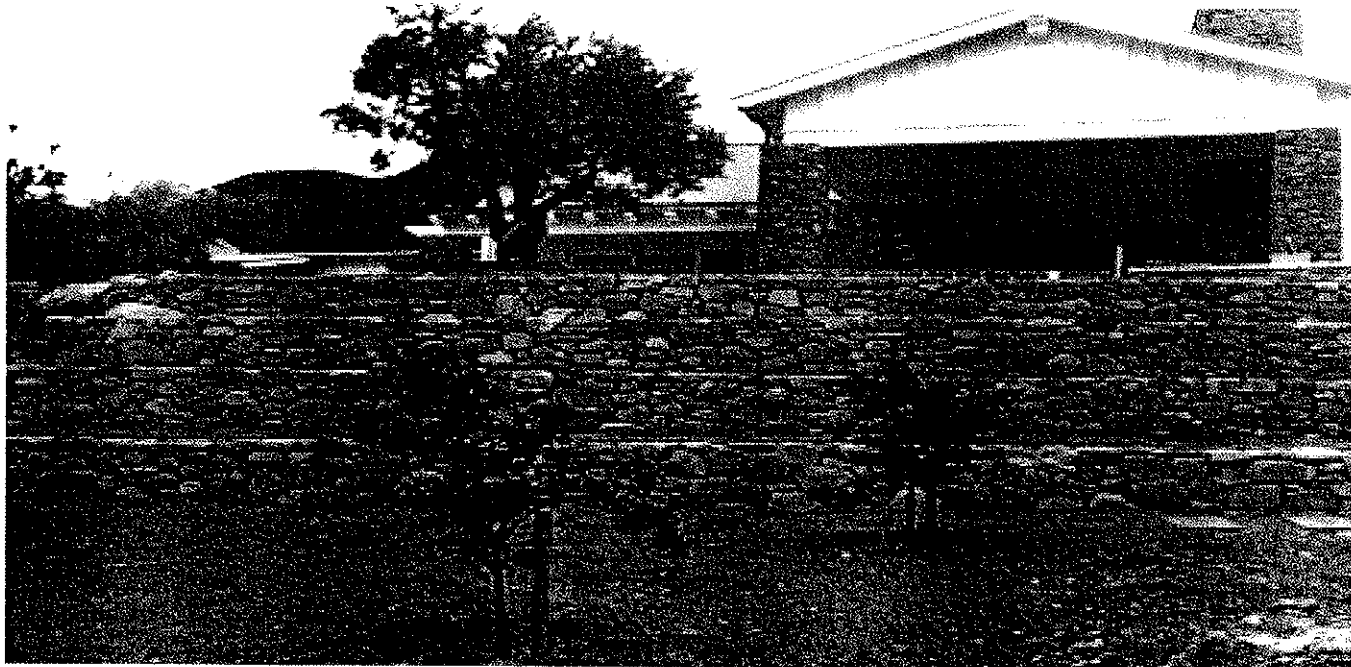
City

State

ZIP Code

Company NAIC Number:

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*Elevated Pad South West**Elevated Pad South East*

Building Photographs

Continuation Page

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No., P.O. Route and Box No.)

1888 Garst Lane

City

Ojai

State

CA

ZIP Code

93023

FOR INSURANCE COMPANY USE

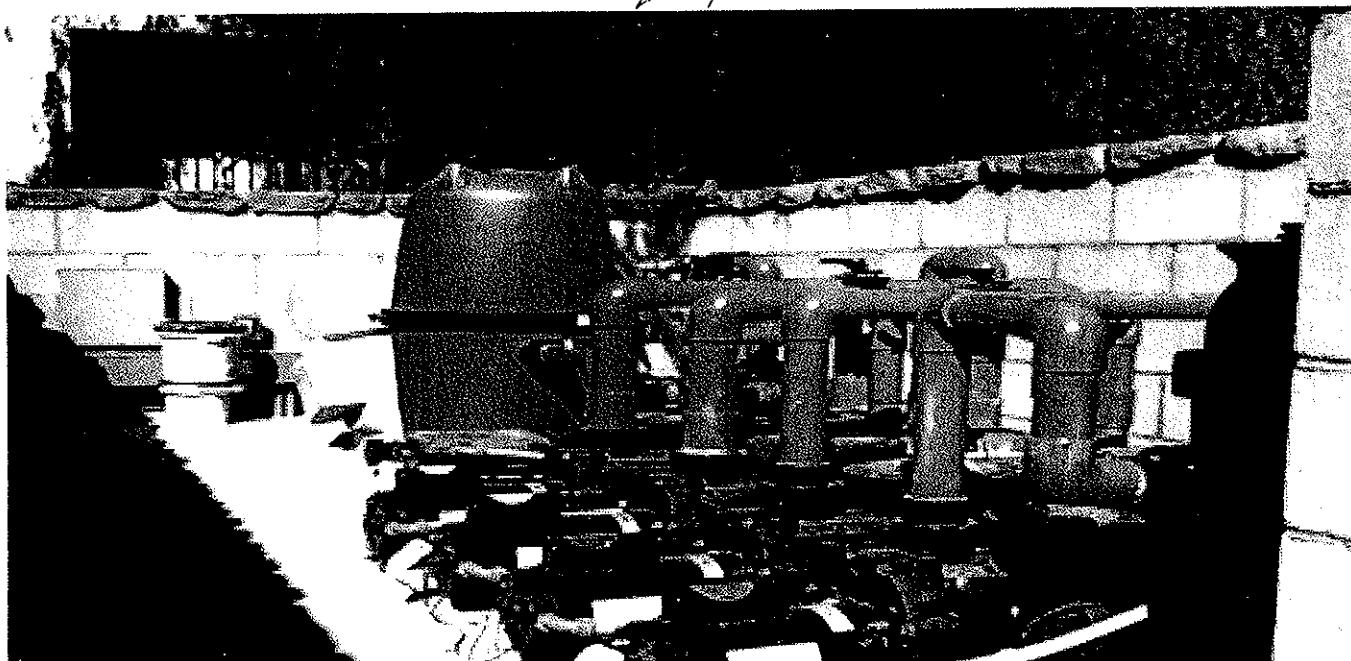
Policy Number:

Company NAIC Number:

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 cross-sections of the lined openings or vents, as indicated in Section A8.



Elevated Equipment Pad



Elevated Equipment

Building Photographs

Continuation Page

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1888 Garst Lane

City

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CA

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93023

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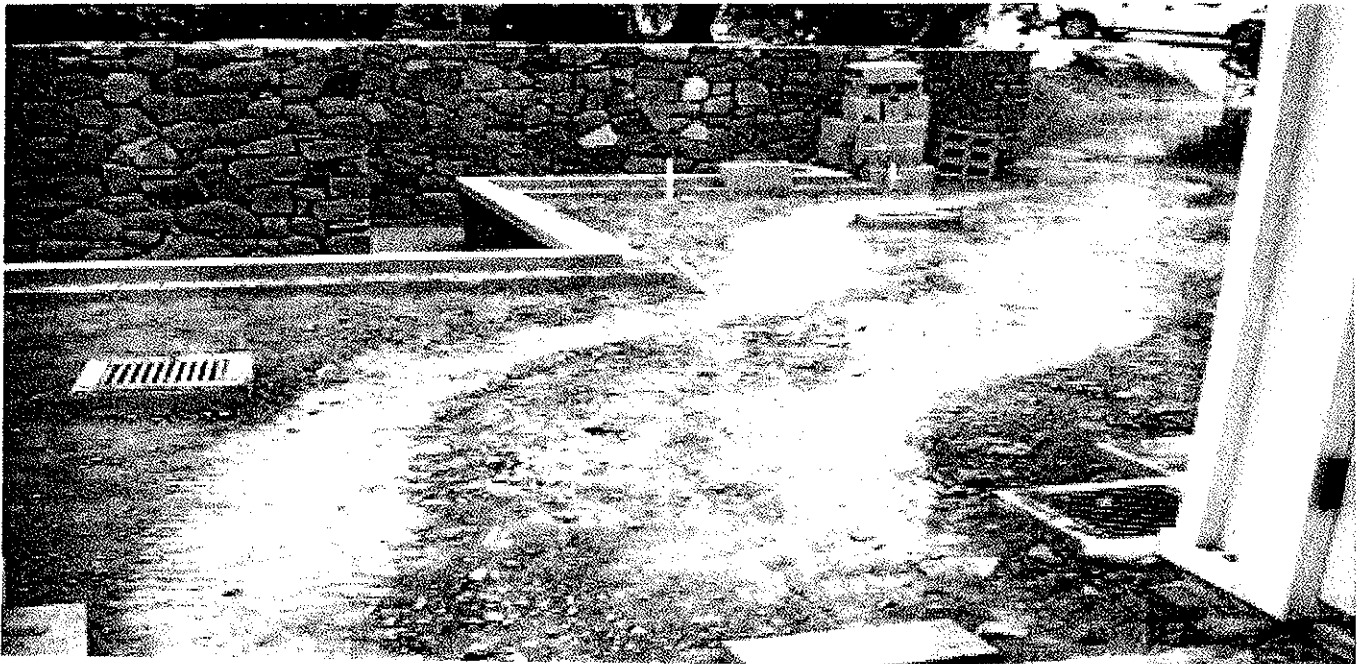
Policy Number:

Company NAIC Number:

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South West Elevated Pad



North West Elevated Pad

Building Photographs

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Building Name, Street, Route and Box No.)

FOR INSURANCE COMPANY USE

Policy Number

Company NAIC Number

1888 Gaist Lane

State

ZIP Code

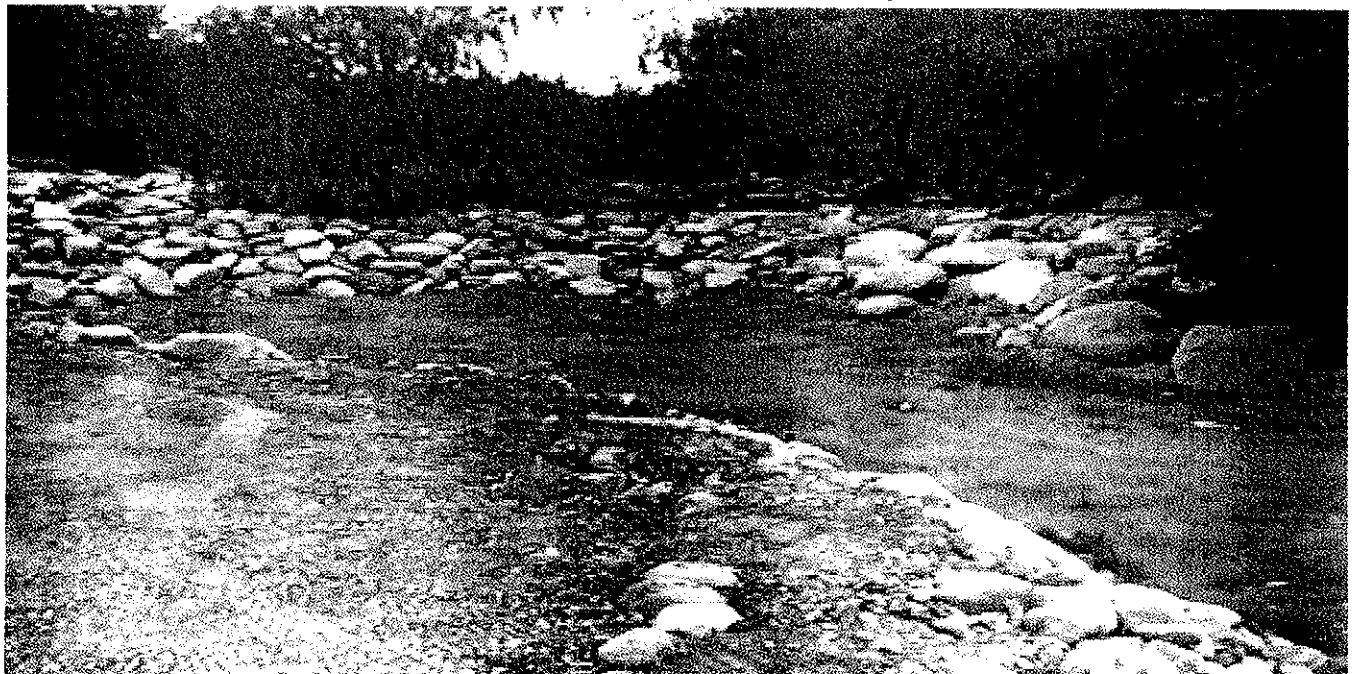
CA

93023

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Elevated Pad East



Detention Basin South East of Lot