U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

IMPORTANT: Follow the instructions on pages 1–9.

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

SECTION A – PROPERTY INFORMATION			FOI	FOR INSURANCE COMPANY USE	
A1. Building Owner's Name ASHLEY PAYNE RANCH, INC.			Poli	Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 13330 COUNTY ROAD 102			200	npany NAIC Number:	
City WOODLAND	State	CA	ZIP	^{Code} 95776	
A3. Property Description (Lot and Block Numbers, Tax Parce ASSESSOR'S PARCEL NUMBER: 027-020-0	75-000				
A4. Building Use (e.g., Residential, Non-Residential, Addition A5. Latitude/Longitude: Lat38°44'29.2" A6. Attach at least 2 photographs of the building if the Cert A7. Building Diagram Number1B A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) No. of permanent flood openings in the crawlspace enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b d) Engineered flood openings? ☐ Yes ☒ No	Long121°44 09.5° tificate is being used to obt	A9. For a build a) Square b) Numbe within 2 c) Total ne	Horizontal Datunce. Ing with an attach footage of attach	ed garage: ned garage od openings in the attached garent grade nend grade N/A nenings in A9.b	sq ft d garage sq in
SECTION B – FLOO	D INSURANCE RATE N	IAP (FIRM) I	NFORMATION		
B1. NFIP Community Name & Community Number YOLO COUNTY UNINCORPORATED 0600 B4. Map/Panel Number B5. Suffix B6. FIRM Index 06113C 0455 G 06/18/20	Date B7. FIRM Panel B Revised Date	Effective/ B8	OLO . Flood Zone(s) A	B9. Base Flood Elevation(s) A0, use base flood depring SEE SECTION D	th)
B10. Indicate the source of the Base Flood Elevation (BFE) d		ered in Item B9			
B12. Is the building located in a Coastal Barrier Resources S Designation Date: / / CBF	System (CBRS) area or Othe	rwise Protected		Yes 🛛 No	
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when cons	truction of the building is co		_	Finished Construction	
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V2 C2.a–h below according to the building diagram specific Benchmark Utilized: N.G.S. DESIGNATION "FOR	ed in Item A7. In Puerto Ric	o only, enter me Datum: N.A.V.	ters.	ny Ao. Complete items	
Indicate elevation datum used for the elevations in item Datum used for building elevations must be the same a	ns a) through h) below. ns that used for the BFE.	NGVD 1929 🔀	NAVD 1988 Check the meas		
a) Top of bottom floor (including basement, crawlspace,	, or enclosure floor)	37 . 3		meters	
b) Top of the next higher floor		I/A		meters	
c) Bottom of the lowest horizontal structural member (\		I/A		☐ meters ☐ meters	
 d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicin (Describe type of equipment and location in Commercial 	g the building	37 . 4		☐ meters	
f) Lowest adjacent (finished) grade next to building (LA		36 . 8		☐ meters	
g) Highest adjacent (finished) grade next to building (H	AG)	37 . 2		meters	
 h) Lowest adjacent grade at lowest elevation of deck or structural support 	r stairs, including	36 . 8	⊠ feet	☐ meters	
SECTION D - SURVI	EYOR, ENGINEER, OR A	RCHITECT C	ERTIFICATION		
This certification is to be signed and sealed by a land surveyo information. I certify that the information on this Certificate rep I understand that any false statement may be punishable by fin	resents my best efforts to it	nterpret the data	available.	CONNI LAND	SUNG
 ☑ Check here if comments are provided on back of form. ☑ Check here if attachments. 	Were latitude and longitud licensed land surveyor?		provided by a	CHRISTOPHEI	3 W. 3
Certifier's Name CHRISTOPHER W. LERCH		License Number	5. 7906	SEAL SEAL	,)-
Title PRINCIPAL/SENIOR SURVEYOR	Company Name LAUGENOUR AND N	IEIKLE		L87908	750
Address 608 COURT STREET	City WOODLAND	State CA	ZIP Code 95695	BAN	
Signature h	Date 04/02/2013	Telephone	662-1755	L87908	10000

IMPORTANT: In these spaces, copy the corresponding information from Secti		FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Ro 13330 COUNTY ROAD 102		Policy Number:
ity State WOODLAND CA	ZIP Code 95776	Company NAIC Number:
SECTION D - SURVEYOR, ENGINEER, OR A	ARCHITECT CERTIFICATION	N (CONTINUED)
opy both sides of this Elevation Certificate for (1) community official, (2) insur	rance agent/company, and (3) b	uilding owner.
ADDED TO ACHIEVE N.A.V.D. 88. THE B.F.E. WAS DETER ADDED TO ACHIEVE N.A.V.D. 88. THE BUILDING HAS TRANSFORMER POLE WITH GFI'S ABOVE THE B.F.E.	A 30' X 125' LEEN-TO, OF	PEN ON THREE SIDES, A NEW
signature de la companya de la compa	Date 04/02/2013	
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY)	NOT REQUIRED) FOR ZON	E AO AND ZONE A (WITHOUT BFE)
or Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is in or Items E1–E4, use natural grade, if available. Check the measurement used	ntended to support a LOMA or I . In Puerto Rico only, enter met	OMR-F request, complete Sections A, B, and ers.
1. Provide elevation information for the following and check the appropriate bo	oxes to show whether the eleva	tion 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	0 . 1 ⊠ feet □	meters 🛛 above or 🗌 below the HAG.
b) Top of bottom floor (including basement, crawlspace, or enclosure) is		
2. For Building Diagrams 6–9 with permanent flood openings provided in Secti	ion A Items 8 and/or 9 (see pa	ges 8–9 of Instructions),
the next higher floor (elevation C2.b in the diagrams) of the building is		meters above or below the HAG.
3. Attached garage (top of slab) is		
4. Top of platform of machinery and/or equipment servicing the building is		
5. Zone AO only: If no flood depth number is available, is the top of the botton ordinance? ☐ Yes ☑ No ☐ Unknown. The local official must certify the		vith the community's floodplain management
SECTION F - PROPERTY OWNER (OR OWI	NER'S REPRESENTATIVE)	CERTIFICATION
ne property owner or owner's authorized representative who completes Sectione AO must sign here. The statements in Sections A, B, and E are correct to	the best of my knowledge.	
roperty Owner or Owner's Authorized Representative's Name CHRISTOPHE		
ddress 608 COURT STREET	City WOODLAND	State CA ZIP Code 95695
gnature	Date 04/02/2013	Telephone (530)662-1755
omments		
		☐ Check here if attachments
SECTION G - COMMUNITY	INFORMATION (OPTIONAL	L)
ne local official who is authorized by law or ordinance to administer the commun of this Elevation Certificate. Complete the applicable item(s) and sign below. Cl	neck the measurement used in I	tems G8–G10. In Puerto Rico only, enter meter
 The information in Section C was taken from other documentation th who is authorized by law to certify elevation information. (Indicate the 	at has been signed and sealed	by a licensed surveyor, engineer, or archite
 A community official completed Section E for a building located in Zone 	e A (without a FEMA-issued or c	ommunity-issued BFE) or Zone AO.
3. ☐ The following information (Items G4–G9) is provided for community fl	loodplain management purpos	es.
4. Permit Number — OOO G5. Date Permit Issued		ate Of Compliance/Occupancy Issued
 This permit has been issued for: New Construction Substant Elevation of as-built lowest floor (including basement) of the building: 	ial Improvement <mark>13 </mark>	meters Datum NAVA
of Floration of agrant tomost most furnishming and amount of the amount of	2 0 -	meters Datum NAVA
10. Community's design flood elevation:		meters Datum N/A
ocal Official's Name Laneu Butur	Title Burana	OFFICIAL
ommunity Name Your County	Telephone 666-86	
ignature Sorell Butt	Date 9-3-13	
omments		
MINDA FLOOD VARIANCE ISSUES	٥٠	

Replaces all previous editions.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, a 13330 COUNTY ROAD 102	nd/or Bldg. No.) or P.O.	Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number:
WOODLAND	CA	95776	

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.

WEST SIDE VIEW



ELEVATION CERTIFICATE, page 4

BUILDING PHOTOGRAPHS

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.		FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite 13330 COUNTY ROAD 102	, and/or Bldg. No.) or P.O. I	Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number:
WOODLAND	CA	95776	

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.

EAST SIDE VIEW

