### RECEIVED

By glopez at 1:29 pm, Sep 11, 2015

U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

## **ELEVATION CERTIFICATE**

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

	SECTION A – PROPERTY INFORMATION			UN	FOR INSURANCE COMPANY USE	
1. Building Ov	Iding Owner's Name ASHLEY PAYNE RANCH, INC.				Policy Number:	
	ilding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. 13330 COUNTY ROAD 102			o.	Company NAIC Number:	
	y WOODLAND State CA				ZIP Code 95776	
The state of the s	roperty Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) ASSESSOR'S PARCEL NUMBER: 027-020-075-000					
A4. Building Us A5. Latitude/Lc A6. Attach at le A7. Building Dia A8. For a buildi a) Square b) No. of p enclosu c) Total ne	se (e.g., Residential, Non-Rongitude: Lat. 38°44'29 east 2 photographs of the agram Number 1B ing with a crawlspace or erfootage of crawlspace or experiment flood openings in the street area of flood openings in the street area.	residential, Addition, A 2" building if the Certifica 	Accessory, etc.) NO! Long121°44'09	obtain flood in  A9. For a l  a) Sq b) Nu wit c) To	Horizontal surance.  building with an at puare footage of at imber of permaneithin 1.0 foot above	tached garage: tached garage tached garage tached garage tached garage at flood openings in the attached garage adjacent grade d openings in A9.b  N/A sq in
	SEC	TION B - FLOOD I	INSURANCE RATE	F MAP (FIRE	M) INFORMATION	ON
	unity Name & Community	Number	B2. County Na		YOLO	B3. State CA
YOLO 34. Map/Panel	Number B5. Suffix	B6. FIRM Index Dat		el Effective/	B8. Flood Zone(	
06113C 0	455 G	06/18/2010	Revised D 06/18		A	AO, use base flood depth) 36.0' (SEE SECTION D)
	e source of the Base Floor					1 30.0 (GEE SECTION D)
Designation  1. Building ele	ling located in a Coastal B n Date: /  SECTI evations are based on: evation Certificate will be re-	ON C - BUILDING  Construction Dra	OPA  ELEVATION INFO	RMATION (S	SURVEY REQUI	3,0
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IMPORTANT: In these spaces, copy the corresponding informat			OR INSURANCE COMPANY USE
uilding Street Address (including Apt., Unit, Suite, and/or Bldg. 13330 COUNTY ROAD 102			olicy Number:
ty Sta VOODLAND C		Co	ompany NAIC Number:
SECTION D - SURVEYOR, ENG	INEER, OR ARCHITECT CE	RTIFICATION (CON	TINUED)
opy both sides of this Elevation Certificate for (1) community of	ficial, (2) insurance agent/comp	any, and (3) building ov	vner.
OMMENTS  B.F.E. IS SHOWN ON THE FLOOD SAFE YO ATTACHED. ALL SOLAR ARRAY MACHINI AN ELECTRICAL PANEL.			
ignature / luni a	Date 08/27/2	2015	
SECTION E - BUILDING ELEVATION INFORMATION	(SURVEY NOT REQUIRED	) FOR ZONE AO A	ND ZONE A (WITHOUT BFE)
or Zones AO and A (without BFE), complete Items E1-E5. If the			quest, complete Sections A, B, and C
or Items E1–E4, use natural grade, if available. Check the meas			
<ol> <li>Provide elevation information for the following and check the grade (HAG) and the lowest adjacent grade (LAG).</li> </ol>	appropriate boxes to snow when	ther the elevation is ab	ove or below the nignest adjacent
a) Top of bottom floor (including basement, crawlspace, or en	closure) is N/A	☐ feet ☐ meters	above or below the HAG.
b) Top of bottom floor (including basement, crawlspace, or en	closure) is N/A.	☐ feet ☐ meters	above or below the LAG.
2. For Building Diagrams 6–9 with permanent flood openings pro	ovided in Section A Items 8 and,	or 9 (see pages 8-9 c	of Instructions),
the next higher floor (elevation C2.b in the diagrams) of the b	uilding is N/A	☐ feet ☐ meters	above or below the HAG.
3. Attached garage (top of slab) is	N/A	☐ feet ☐ meters	above or below the HAG.
1. Top of platform of machinery and/or equipment servicing the	building is N/A .	☐ feet ☐ meters	above or below the HAG.
5. Zone AO only: If no flood depth number is available, is the topordinance? Yes No Unknown. The local official	p of the bottom floor elevated in must certify this information in		ommunity's floodplain management
SECTION F - PROPERTY OWN	ER (OR OWNER'S REPRES	ENTATIVE) CERTIF	ICATION
ne property owner or owner's authorized representative who corone AO must sign here. The statements in Sections A, B, and E	are correct to the best of my kr		A-Issued or community-Issued BFE) o
roperty Owner or Owner's Authorized Representative's Name N	/A		
ddress N/A	City N/A		N/A ZIP Code N/A
gnature	Date N/A	Teleph	none N/A
omments			
			☐ Check here if attachments
SECTION G - C	OMMUNITY INFORMATION	(OPTIONAL)	
ne local official who is authorized by law or ordinance to administ of this Elevation Certificate. Complete the applicable item(s) and			
31.   The information in Section C was taken from other doc			
who is authorized by law to certify elevation information	n. (Indicate the source and date	e of the elevation data	in the Comments area below.)
2.   A community official completed Section E for a building	located in Zone A (without a FEA	MA-issued or community	rissued BFE) or Zone AO.
3. The following information (Items G4–G9) is provided fo	r community floodplain manage	ment purposes.	
4. Permit Number G5. Date Permit I	ssued G6.	Date Certificate Of Con	mpliance/Occupancy Issued
7. This permit has been issued for: New Construction	☐ Substantial Improvement		
8. Elevation of as-built lowest floor (including basement) of the		☐ feet ☐ meters	Datum
9. BFE or (in Zone AO) depth of flooding at the building site:		☐ feet ☐ meters	Datum
10. Community's design flood elevation:		☐ feet ☐ meters	Datum
ocal Official's Name	Title	100	
community Name	Telephone	C130	11 11 0
70/0 County	Date	(580) (	266-8803
Sidnature O		10	-16-16
Signature Sel Survey	Dute	10	13-13
comments		lateu on	1/y!
Ed Sur		lateur on	1/y!

### **ELEVATION CERTIFICATE**, page 3

### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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

# **FRONT VIEW (TAKEN 08/27/2015)**



### **ELEVATION CERTIFICATE**, page 4

### **BUILDING PHOTOGRAPHS**

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURANCE COMPANY USE	
	eet Address (including Apt., Unit, Suite DUNTY ROAD 102	, and/or Bldg. No.) or P.O. Rout	e and Box No.	Policy Number:	
City		State	ZIP Code	Company NAIC Number:	
	WOODLAND	CA	95776	A fact 100 mg	

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.

# **REAR & WEST SIDE VIEWS (TAKEN 08/27/2015)**







