

OFFICE SET ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name KYLE LANG				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 38850 COUNTY ROAD 18				Company NAIC Number:	
City WOODLAND		State CA		ZIP Code 95695	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) ASSESSOR'S PARCEL NUMBER: 027-180-007-000					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL					
A5. Latitude/Longitude: Lat. 38°43'43.7" Long. -121°47'15.3" Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.					
A7. Building Diagram Number 1B					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) N/A sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A					
c) Total net area of flood openings in A8.b N/A sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage 985 sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade NONE					
c) Total net area of flood openings in A9.b 0 sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number YOLO COUNTY UNINCORPORATED 060423			B2. County Name YOLO		B3. State CA
B4. Map/Panel Number 06113C 0435	B5. Suffix H	B6. FIRM Index Date 05/16/2012	B7. FIRM Panel Effective/ Revised Date 05/16/2012	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 68.6'
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 type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input checked="" type="checkbox"/> Other/Source: SEE SECTION D					
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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

1950-51069

PREVIOUSLY
 AUG 09 2017
 SCANNED

RECEIVED

JUN 22 2017

SCANNED

Yolo County
 Department of
 Community Services

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 38850 COUNTY ROAD 18			Policy Number:
City WOODLAND	State CA	ZIP Code 95695	Company NAIC Number

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: **HPGN CA 0308** Vertical Datum: **N.A.V.D. 88**

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.

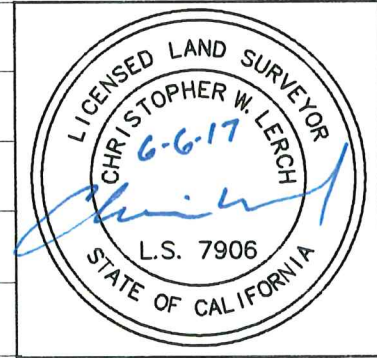
- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 70 1 feet meters
- b) Top of the next higher floor 80 1 feet meters
- c) Bottom of the lowest horizontal structural member (V Zones only) N/A feet meters
- d) Attached garage (top of slab) 69 8 feet meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 70 1 feet meters
- f) Lowest adjacent (finished) grade next to building (LAG) 69 0 feet meters
- g) Highest adjacent (finished) grade next to building (HAG) 69 7 feet meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 69 0 feet 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.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.

Certifier's Name CHRISTOPHER W. LERCH	License Number L.S. 7906
Title PRINCIPAL/SENIOR SURVEYOR	
Company Name LAUGENOUR AND MEIKLE	
Address 608 COURT STREET	
City WOODLAND	State CA ZIP Code 95695



Signature *[Signature]* Date **06/06/2017** Telephone **(530)662-1755**

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)

LOWEST MACHINERY IS THE AIR CONDITIONING UNIT. B.F.E. WAS TAKEN FROM CLOMR-F CASE NO. 15-09-0774C.

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 38850 COUNTY ROAD 18			Policy Number:
City WOODLAND	State CA	ZIP Code 95695	Company NAIC Number

**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 **N/A** feet meters above or below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is **N/A** 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 1–2 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 **N/A** 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.

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 or Owner's Authorized Representative's Name

N/A

Address N/A	City N/A	State N/A	ZIP Code N/A
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Signature	Date N/A	Telephone N/A
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Comments

N/A

Check here if attachments.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 38850 COUNTY ROAD 18			Policy Number:
City WOODLAND	State CA	ZIP Code 95695	Company NAIC Number

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 BP 2015-0564	G5. Date Permit Issued 9/25/15	G6. Date Certificate of Compliance/Occupancy Issued
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G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: 70 1 feet meters Datum 1988

G9. BFE or (in Zone AO) depth of flooding at the building site: 68 6 feet meters Datum 1988

G10. Community's design flood elevation: NA feet meters Datum _____

Local Official's Name Tom W Davis	Title Building Inspector
Community Name Yolo County Building	Telephone 530 666-8035
Signature <i>Tom W Davis</i>	Date 6/26/17

Comments (including type of equipment and location, per C2(e), if applicable)

Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

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

FOR INSURANCE COMPANY USE

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
38850 COUNTY ROAD 18

Policy Number:

City State ZIP Code
WOODLAND CA 95695

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.



Photo One Caption **FRONT VIEW (TAKEN 06/05/2017)**



Photo Two Caption **SIDE & REAR VIEWS (TAKEN 06/05/2017)**

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008
Expiration Date: November 30, 2018

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 38850 COUNTY ROAD 18	Policy Number:
City WOODLAND	State CA
ZIP Code 95695	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 flood openings or vents, as indicated in Section A8.

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Photo One Caption
Photo Two Caption



Federal Emergency Management Agency

Washington, D.C. 20472

CONDITIONAL LETTER OF MAP REVISION BASED ON FILL COMMENT DOCUMENT

COMMUNITY AND MAP PANEL INFORMATION		LEGAL PROPERTY DESCRIPTION
COMMUNITY	YOLO COUNTY, CALIFORNIA (Unincorporated Areas)	A portion of Township 10 North, Range 2 East, Mount Diablo Base and Meridian, as described in the Quitclaim Deed recorded as Document No. 2000-0002906-00, in the Office of the Recorder, Yolo County, California (APN: 027-180-007-000)
	COMMUNITY NO.: 060423	
AFFECTED MAP PANEL	NUMBER: 06113C0435H DATE: 5/16/2012	
FLOODING SOURCE: CACHE CREEK		APPROXIMATE LATITUDE & LONGITUDE OF PROPERTY: 38.729, -121.787 SOURCE OF LAT & LONG: GOOGLE EARTH PRO DATUM: NAD 83

COMMENT TABLE REGARDING THE PROPOSED PROPERTY (PLEASE NOTE THAT THIS IS NOT A FINAL DETERMINATION. A FINAL DETERMINATION WILL BE MADE UPON RECEIPT OF AS-BUILT INFORMATION REGARDING THIS PROPERTY.)

LOT	BLOCK/ SECTION	SUBDIVISION	STREET	OUTCOME WHAT WOULD BE REMOVED FROM THE SFHA	FLOOD ZONE	1% ANNUAL CHANCE FLOOD ELEVATION (NAVD 88)	LOWEST ADJACENT GRADE ELEVATION (NAVD 88)	LOWEST LOT ELEVATION (NAVD 88)
--	--	--	38850 County Road 18	Structure	X (shaded)	68.6 feet	68.6 feet	--

Special Flood Hazard Area (SFHA) - The SFHA is an area that would be inundated by the flood having a 1-percent chance of being equaled or exceeded in any given year (base flood).

ADDITIONAL CONSIDERATIONS (Please refer to the appropriate section on Attachment 1 for the additional considerations listed below.)

PORIONS REMAIN IN THE SFHA
CONDITIONAL LOMR-F DETERMINATION

This document provides the Federal Emergency Management Agency's comment regarding a request for a Conditional Letter of Map Revision based on Fill for the property described above. Using the information submitted and the effective National Flood Insurance Program (NFIP) map, we have determined that the proposed structure(s) on the property(ies) would not be located in the SFHA, an area inundated by the flood having a 1-percent chance of being equaled or exceeded in any given year (base flood) if built as proposed. Our final determination will be made upon receipt of a copy of this document, as-built elevations, and a completed Community Acknowledgement form. Proper completion of this form certifies the subject property is reasonably safe from flooding in accordance with Part 65.5(a)(4) of our regulations. Further guidance on determining if the subject property is reasonably safe from flooding may be found in FEMA Technical Bulletin 10-01. A copy of this bulletin can be obtained by calling the FEMA Map Assistance Center toll free at (877) 336-2627 (877-FEMA MAP) or from our web site at <http://www.fema.gov/mit/tb1001.pdf>. This document is not a final determination; it only provides our comment on the proposed project in relation to the SFHA shown on the effective NFIP map.

This comment document is based on the flood data presently available. The enclosed documents provide additional information regarding this request. If you have any questions about this document, please contact the FEMA Map Assistance Center toll free at (877) 336-2627 (877-FEMA MAP) or by letter addressed to the Federal Emergency Management Agency, LOMC Clearinghouse, 847 South Pickett Street, Alexandria, VA 22304-4605.

Luis Rodriguez, P.E., Chief
Engineering Management Branch
Federal Insurance and Mitigation Administration



Federal Emergency Management Agency

Washington, D.C. 20472

CONDITIONAL LETTER OF MAP REVISION BASED ON FILL COMMENT DOCUMENT

ATTACHMENT 1 (ADDITIONAL CONSIDERATIONS)

PORTIONS OF THE PROPERTY REMAIN IN THE SFHA (This Additional Consideration applies to the preceding 1 Property.)

Portions of this property, but not the subject of the Determination/Comment document, may remain in the Special Flood Hazard Area. Therefore, any future construction or substantial improvement on the property remains subject to Federal, State/Commonwealth, and local regulations for floodplain management.

CONDITIONAL LOMR-F DETERMINATION (This Additional Consideration applies to the preceding 1 Property.)

Comments regarding this conditional request are based on the flood data presently available. Our final determination will be made upon receipt of this Comment Document, certified as-built elevations and/or certified as-built survey. Since this request is for a Conditional Letter of Map Revision based on Fill, we will also require the applicable processing fee, and the "Community Acknowledgement" form. Please note that additional items may be required before a final as-built determination is issued.

This letter does not relieve Federal agencies of the need to comply with Executive Order 11988 on Floodplain Management in carrying out their responsibilities and providing Federally undertaken, financed, or assisted construction and improvements, or in their regulating or licensing activities.

This attachment provides additional information regarding this request. If you have any questions about this attachment, please contact the FEMA Map Assistance Center toll free at (877) 336-2627 (877-FEMA MAP) or by letter addressed to the Federal Emergency Management Agency, LOMC Clearinghouse, 847 South Pickett Street, Alexandria, VA 22304-4605.

A handwritten signature in black ink, appearing to read "Luis Rodriguez".

Luis Rodriguez, P.E., Chief
Engineering Management Branch
Federal Insurance and Mitigation Administration

LETTER OF TRANSMITTAL

Permit # BP 2015-0564

TO: LANG ORCHARDS
P.O. BOX 655
WOODLAND, CALIFORNIA 95776

DATE: 06/06/2017	JOB NO.: 567-12-1
ATTENTION: KYLE LANG OR COLIN MONLEY	
PROJECT: ELEVATION CERTIFICATES	

WE ARE SENDING YOU: ATTACHED UNDER SEPARATE COVER


VIA:
 U.S. MAIL FEDERAL EXPRESS U.P.S.
 EXPRESS MAIL OVERNIGHT PRIORITY FAX
 OUR MESSENGER YOUR MESSENGER E-MAIL

THE FOLLOWING:
 AS REQUESTED PRINTS/COPIES MYLARS
 FOR YOUR USE ELECTRONIC MEDIA LOT LINE ADJUSTMENT PACKAGE
 FOR REVIEW AND COMMENT TOPOGRAPHIC SURVEY ELEVATION CERTIFICATE
 FOR APPROVAL FINAL PARCEL MAP RECORD OF SURVEY
 FOR SIGNATURES IMPROVEMENT PLANS LEGAL DESCRIPTIONS/EXHIBITS
 FOR PAYMENT SITE PLAN DETAIL SKETCH
 FOR SUBMITTAL RECORD OF SURVEY CONTRACT DOCUMENTS

COPIES	DATE	REVISION	DESCRIPTION
4			FINISHED CONSTRUCTION ELEVATION CERTIFICATES (W/2 ORIGINALS)

REMARKS: _____

COPY TO: _____

 BY:  _____
 CHRISTOPHER W. LERCH, PRINCIPAL, L.S.