FEMA Form 81-31, AUG 99

BP 200 -0673

REN 640 - 220 FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL ELOOP INSURANCE PROCESSION NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002

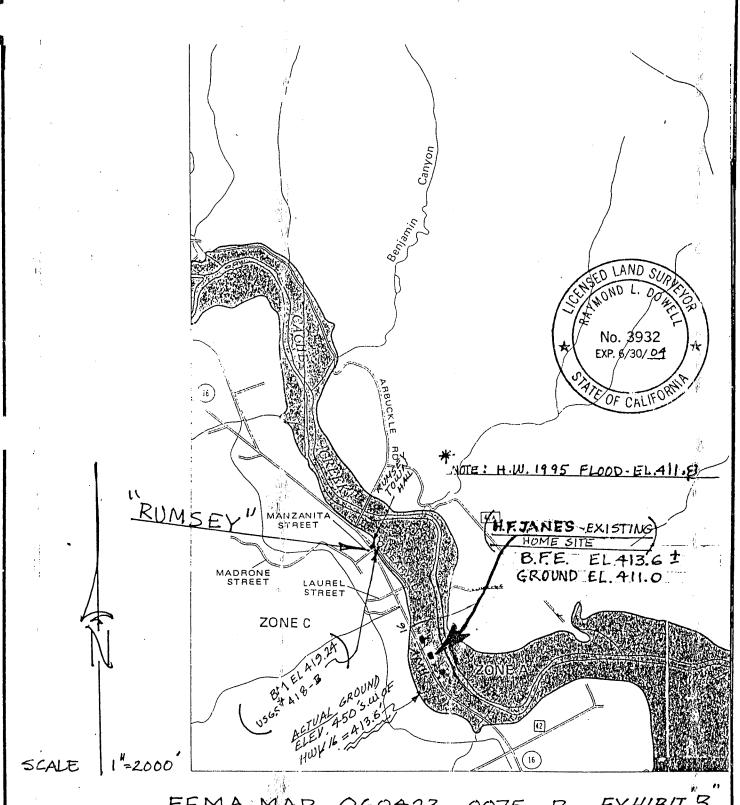
## **ELEVATION CERTIFICATE**

important. Read the instructions on pages 1 - 7.	The state of the property of the state of th
SECTION A - PROPERTY OWNER INFORMATION	For Insurance Company Use:
HOWARD F. JANES	Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.	Company NAIC Number
RUM SEY STATE	ZIP CODE 95679
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  A. P. N. 60 - 220 - 22	
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.)	
LATITUDE/LONGITUDE (OPTIONAL)   HORIZONTAL DATUM:   SOURCE:     GPS (Type):   (##° - ##' - ##.##" or ##.#####")	O   Other: <u>USG-S - R.M. 418 - E</u>
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	1
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER  B2. COUNTY NAME  YOLO	B3. STATE CA
B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX DATE DATE EFFECTIVE/REVISED DATE ZONE(S)  B6. FIRM INDEX EFFECTIVE/REVISED DATE ZONE(S)  A	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.    FIS Profile   FIRM   Community Determined   Other (Describe): FIELD  B11. Indicate the elevation datum used for the BFE in B9:   NGVD 1929   NAVD 1988   Other (Describe)	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Are Designation Date:	ea (OPA)?  _  Yes   <b>⊠</b>   No
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIR	ED)
C1. Building elevations are based on:  _ Construction Drawings*  _ Building Under Construction*  *A new Elevation Certificate will be required when construction of the building is complete.  C2. Building Diagram Number 8 (Select the building diagram most similar to the building for which this compages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)  C3. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1  Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum use the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measu calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to Datum NGVD 1929 Conversion/Comments  Elevation reference mark used U365 BM 418 B Does the elevation reference mark used appea  a) Top of bottom floor (including basement or enclosure)	-A30, AR/AH, AR/AO ed. If the datum is different from rements and datum conversion o document the datum conversion.
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION	DN
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to a larger that the information in Sections A, B, and C on this certificate represents my best efforts to interpret I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1.	certify elevation information. t the data available.
CERTIFIER'S NAME RAYMOND L. DOWELL LICENSE NUMBER L	S. 3932
	PRVEYOR
SIGNATURE 1) ADDRESS CO. R.D. 97 CITY WOODLAND STATE CO. R.D. 97 DATE DATE	A. ZIP CODE 95695"
FEMA Form 81-31, AUG 99 SEE REVERSE SIDE FOR CONTINUATION REPL	ACES ALL PREVIOUS EDITIONS

IMPORTANT: In these spaces, copy				For Insurance Company Use:
BUILDING STREET ADDRESS (Including A				Policy Number
2833 HWY 16 CITY RUM SEY	STATE		ZIP CODE 95679	Company NAIC Number
	SURVEYOR, ENGINEER, O			<del></del>
Copy both sides of this Elevation Certifi	cate for (1) community offici	al, (2) insurance ag	ent/company, and (	3) building owner.
COMMENTS				
			A	
		,		
			,	Check here if attachments
SECTION E - BUILDING ELEVATI	ON INFORMATION (SURV	EY NOT REQUIRE	D) FOR ZONE AO	
For Zone AO and Zone A (without BFE),				
information for a LOMA or LOMR-F, Sec	ction C must be completed.			
E1. Building Diagram Number 8 (Se see pages 6 and 7. If no diagram a	elect the building diagram me	ost similar to the bu	ilding for which this	certificate is being completed -
E2. The top of the bottom floor (including	basement or enclosure) of	the building is	_ 3 /ft/(m)  _ Z/f	n,(cm)  X  above or    below
(check one) the highest adjacent gra	ade.			
E3. For Zone AO only: If no flood depth				
floodplain management ordinance?	Yes    No    Uni PROPERTY OWNER (OR O			is information in Section G.
The property owner or owner's authoriz				
community-issued BFE) or Zone AO m	ust sign here.	,		
RAYMOND L. D	DWELL L.S.	3932 SNAME		
PROPERTY OWNER'S OR OWNER'S AUT	HORIZED KERKESENTATIVE	-		
ADDRESS 17873 CO. RD.	97	CITYWOODLA	TND STATE	CA ZIP CODE 95695
COMMENTS SEE EXHIE	L. Dowell	DATE 10/4/	OI TELEPH	CA ZIP CODE 95695 HONE 530-662-0807
COMMENTS SEE EXHIB	3175 'A" &B			
	/			X  Check here if attachments
	SECTION G - COMMUNIT			
The local official who is authorized by lav				
Sections A, B, C (or E), and G of this Ele G1.     The information in Section C wa	evation Certificate. Complete	e the applicable iten Itation that has been	n(s) and sign below. n signed and embos	ssed by a licensed surveyor.
engineer, or architect who is au	thorized by state or local law	to certify elevation	information. (Indicate	ate the source and date of the
elevation data in the Comments	s area below.)			
G2.    A community official completed	Section E for a building loca	ted in Zone A (with	out a FEMA-issued	or community-issued BFE) or
Zone AO.  G3.    The following information (Items	s G4-G9) is provided for com	munity floodolain m	anagement purposi	es.
	. DATE PERMIT ISSUED			F COMPLIANCE/OCCUPANCY
		ISSUE	D	
G7. This permit has been issued for:		Substantial Improv		ft /m) Datum:
G8. Elevation of as-built lowest floor (inc G9. BFE or (in Zone AO) depth of floodi		uing is:		ft.(m) Datum: ft.(m) Datum:
LOCAL OFFICIAL'S NAME		TITLE		, ,
COMMUNITY NAME		TELEPHON	Ė	
SIGNATURE		DATE		
COMMENTS				
CONTINENTS			,	
				· · · · · · · · · · · · · · · · · · ·
				Check here if attachments

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JANES OMESITI 220-22 LO COUN 55 418-B 419:24	No. 39	HIBI: Z
TV)	04	>

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FEMA MAP 060423-0075-B EXHIBIT 3
HOWARD JANES PROPOSED HOMESITE
Raymuch Lough 10