

015-34 8/19/02 037-050-07
BPA# 202-0892
RECEIVED

AUG 19 2002

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

BLDG SITE "A"

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

Important: Read the instructions on pages 1-7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME CLYDE & KATHERINE KELLY	For Insurance Company Use: Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 26565 CO. RD. 97-D SITE A	Company NAIC Number	
CITY DAVIS	STATE CA	ZIP CODE 95616
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) APN 37-05-07		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) NON-RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###.###" or ##.#####°)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Yolo County 060423	B2. COUNTY NAME YOLO	B3. STATE CA			
B4. MAP AND PANEL NUMBER 060423-0575	B5. SUFFIX C	B6. FIRM INDEX DATE 3/23/99	B7. FIRM PANEL EFFECTIVE/REVISED DATE 3/23/99	B8. FLOOD ZONE(S) A	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 60.4
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input checked="" type="checkbox"/> Other (Describe): FIELD SURVEY PRORATED PER USGS QUAD.					
B11. Indicate the elevation datum used for the BFE in B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe):					
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:					

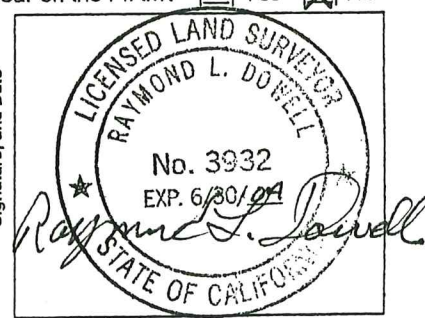
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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. Building Diagram Number **1** (Select the building diagram most similar to the building for which this certificate is being completed - see pages 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, ARA, ARAE, ARA1-A30, ARAH, ARAO
Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
Datum **NGVD 1929** Conversion/Comments _____
Elevation reference mark used **1565 S-128** Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	_____ ft.(m)
<input type="checkbox"/> b) Top of next higher floor	_____ ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____ ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	_____ ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	_____ ft.(m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	58.4 ft.(m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	60.8 ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	_____
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	_____ sq. in. (sq. cm)



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 in Sections A, B, and C 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.

CERTIFIER'S NAME **RAYMOND L DOWELL** LICENSE NUMBER **L.S. 3932**

TITLE **OWNER** COMPANY NAME **RAYMOND L. DOWELL - LAND SURVEYOR**

ADDRESS **17873 CO. RD. 97** CITY **WOODLAND** STATE **CA** ZIP CODE **95695**

SIGNATURE **Raymond L. Dowell** DATE **8/19/02** TELEPHONE **530-662-0807**

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., <u>BLDG SITE "A" = 503 SOUTH OF COVELL BLVD AND 473 WEST</u>			Policy Number
CITY <u>DAVIS</u>	STATE OF <u>CO. RD. 98</u> <u>CA</u>	ZIP CODE <u>95616</u>	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 REFER TO ATTACHED EXHIBITS "A" AND "B"

Check here if attachments

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

For Zone AO and Zone A (without BFE), complete Items E1 through E3. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is 0 ft(m) 0 in(cm) above or below (check one) the highest adjacent grade.
- E3. For 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.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME <u>RAYMOND L. DOWELL - L.S. 3932</u>			
ADDRESS <u>17873 CO. RD. 97</u>	CITY <u>WOODLAND</u>	STATE <u>CA</u>	ZIP CODE <u>95695</u>
SIGNATURE <u>Raymond L. Dowell</u>	DATE <u>6/19/02</u>	TELEPHONE <u>530-662-0807</u>	
COMMENTS			

Check here if attachments

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.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local 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-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	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 is: _____ ft.(m) Datum: _____
- G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE
COMMENTS	

Check here if attachments

RAYMOND L. DOWELL

RD. 97

PHONE

562 0607

LAND SURVEYOR

WOODLAND CA 95695

JOB

CLYDE & KATHERINE KELLY
PROPOSED BLDG. SITE "A" & SITE "B"

CHECKED BY

DATE

5/2/00 REV. 5/8/02

SCALE 1" = 2000'

CALC BY: RLD

SH. 1 OF 2

RLI

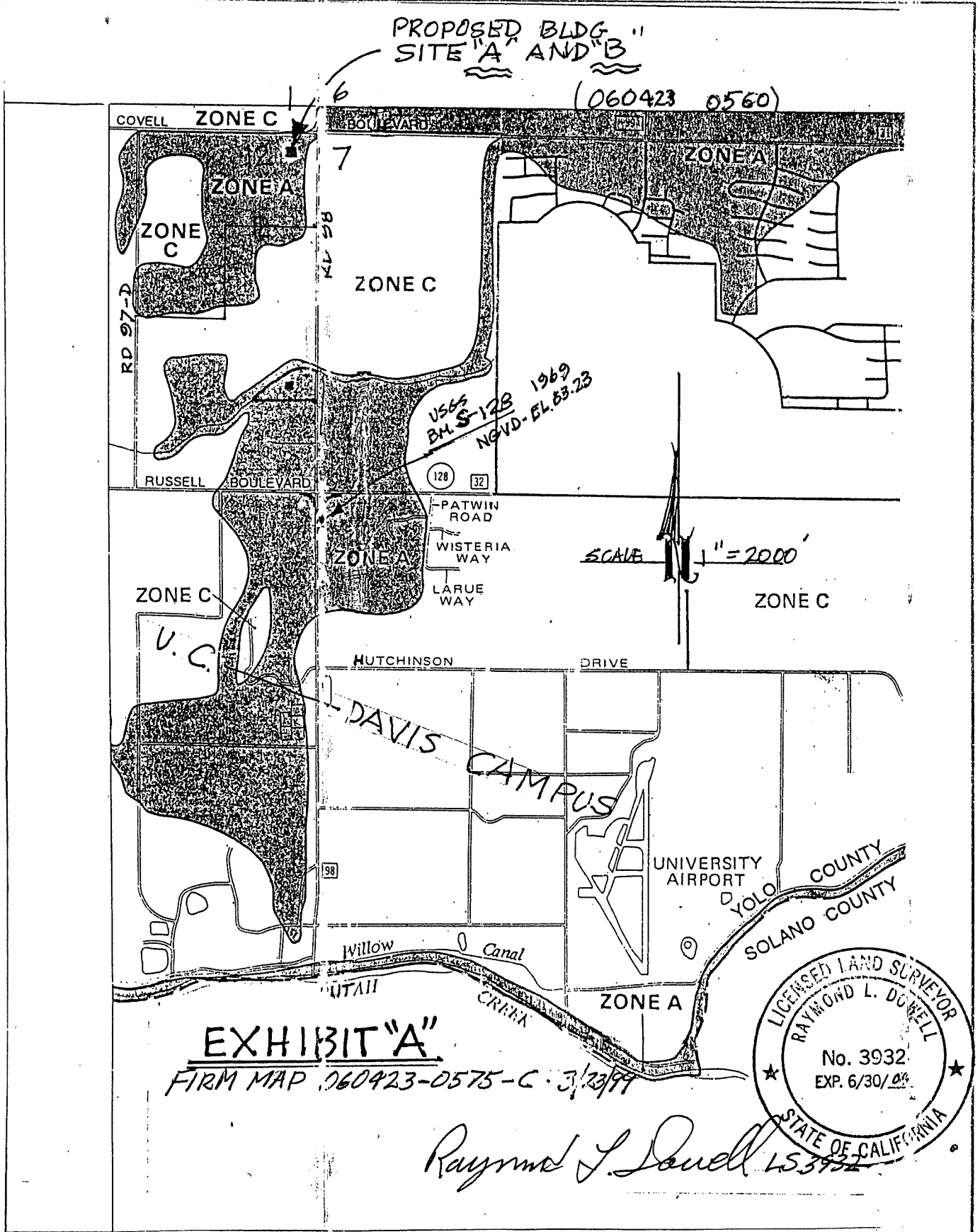
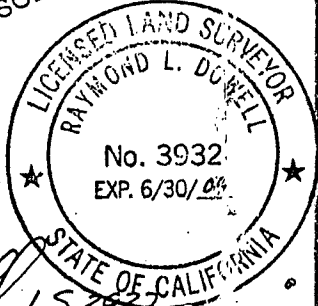


EXHIBIT "A"

FIRM MAP 060423-0575-C 3/23/99



Raymond L. Dowell LS 3932

RAYMOND L. DOWELL
LAND SURVEYOR



LAND SURVEYOR
WOODLAND CA 95695

FOR CLYDE & KATHERINE KELLY
PROPOSED ANIMAL HOUSING & FEED STORAGE
BLDG. - S.W. COR. RD. 98 & COVELL BLVD., YOLO CO

CHECKED BY RLD DATE 5/08/02

SCALE 1"=100' CALC BY ELM SHEET 2 OF 2

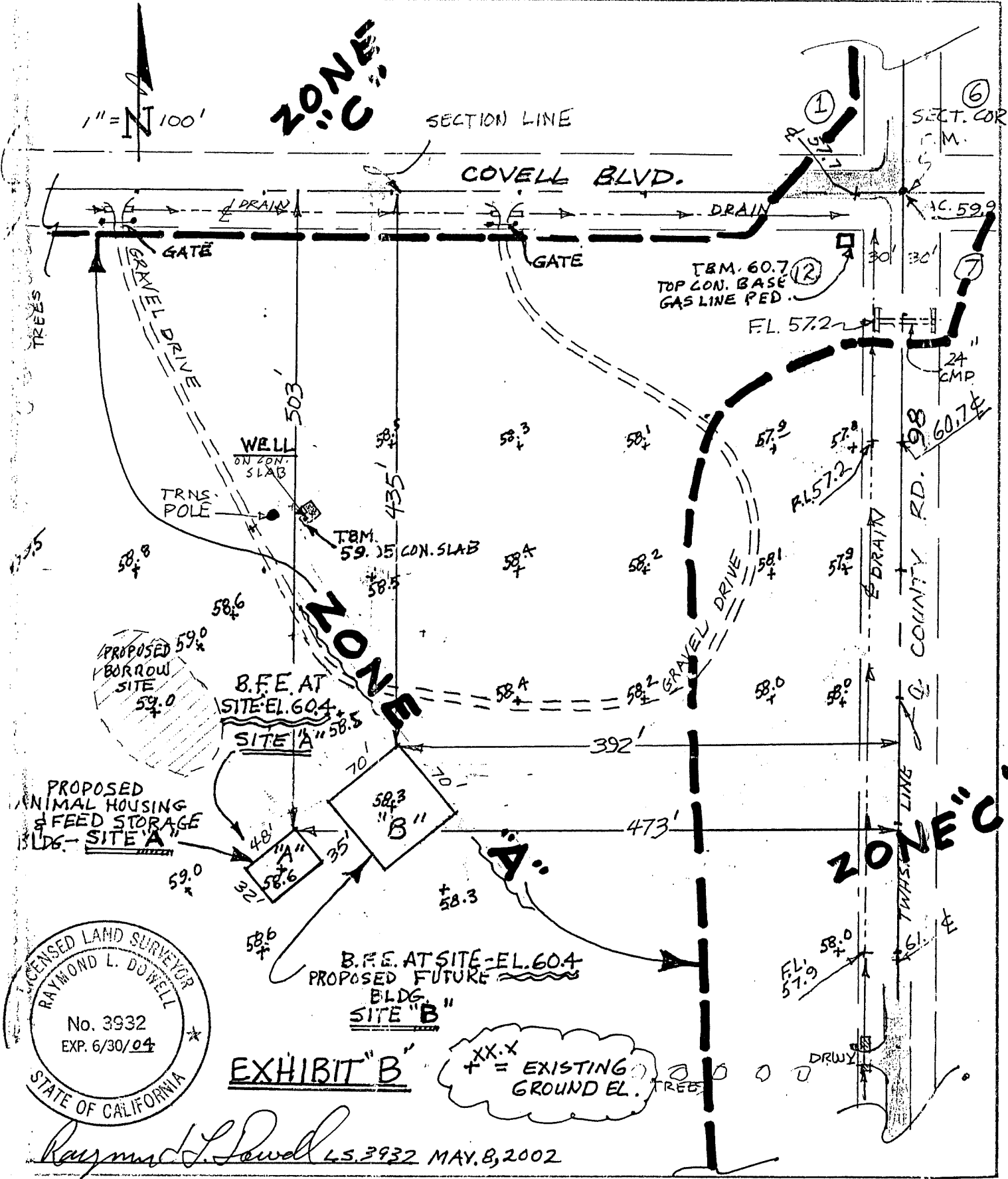


EXHIBIT "B"

XX.X
+ = EXISTING
GROUND EL.

Raymond L. Dowell LS 3932 MAY. 8, 2002