

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>DeKristie Adams</u> Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>24000 County Road 96</u> City <u>Davis</u> State <u>CA</u> ZIP Code <u>95616</u>	For Insurance Company Use:
	Policy Number
	Company NAIC Number

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
 Lots 1 through 4, Block 16, Lucerne Farms, 2 M 13 APN 40-190-17-72

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential
 A5. Latitude/Longitude: Lat. 38°34'42.52 Long. 121°50'25.90 Horizontal Datum: NAD 1927 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 1
 A8. For a building with a crawl space or enclosure(s), provide
 a) Square footage of crawl space or enclosure(s) _____ sq ft
 b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____
 c) Total net area of flood openings in A8.b _____ sq in
 A9. For a building with an attached garage, provide:
 a) Square footage of attached garage _____ sq ft
 b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
 c) Total net area of flood openings in A9.b _____ sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>Yolo County 060423</u>		B2. County Name <u>Yolo</u>		B3. State <u>CA</u>	
B4. Map/Panel Number <u>0555</u>	B5. Suffix <u>C</u>	B6. FIRM Index Date <u>03/23/1999</u>	B7. FIRM Panel Effective/Revised Date <u>03/23/1999</u>	B8. Flood Zone(s) <u>A1</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>80.7</u>

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other (Describe) _____
 B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) _____
 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
 Designation Date _____ CBRS OPA

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-g below according to the building diagram specified in Item A7.
 Benchmark Utilized RM17 Vertical Datum NGVD29
 Conversion/Comments RM17 appears on the FIRM panel


Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor) 82.1 feet meters (Puerto Rico only)
 b) Top of the next higher floor 83.4 feet meters (Puerto Rico only)
 c) Bottom of the lowest horizontal structural member (V Zones only) NA feet meters (Puerto Rico only)
 d) Attached garage (top of slab) 82.8 feet meters (Puerto Rico only)
 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) 82.7 feet meters (Puerto Rico only)
 f) Lowest adjacent (finished) grade (LAG) 82.1 feet meters (Puerto Rico only)
 g) Highest adjacent (finished) grade (HAG) 82.4 feet meters (Puerto Rico only)

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.

Check here if comments are provided on back of form.

Certifier's Name Jim Frame License Number LS 5435
 Title Principal Land Surveyor Company Name Frame Surveying & Mapping
609 A Street City Davis State CA ZIP Code 95616
 Signature  Date 09/28/2006 Telephone 530.756.8584




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. 24850 County Road 96	Policy Number
City Davis State CA ZIP Code 95616	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments Elevations were taken after substantial completion of construction.

Signature  Date 09/28/2006 Check here if attachments

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, crawl space, or enclosure) is _____ feet meters above or below the HAG.
 - b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ 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's or Owner's Authorized Representative's Name _____

ss _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

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. Check the measurement used in Items G8. and G9.

- 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.-G9.) is provided for community floodplain management purposes.

G4. Permit Number <u>205-0939</u>	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: 80.7 feet meters (PR) Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: 82.1 feet meters (PR) Datum _____

Local Official's Name LONELL BUTLER Title CHIEF BUILDING OFFICIAL

Community Name YOLO COUNTY Telephone (530) 666-8775

Signature Lonell Butler Date OCTOBER 31, 2006

Check here if attachments

Building Photographs

See Instructions for Item A6.

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ing Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 24850 County Road 96	For Insurance Company Use: Policy Number
City Davis State CA ZIP Code 95616	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.



Front View



Rear View

YOLO COUNTY SECURED ROLL

INQUIRE PARCEL HISTORY

ENTER PARCEL # OR END TO EXIT: 04019017

040-190-17-1	TO	040-190-71-1	06-013	02-03-2005	SPLIT
040-190-17-1	TO	040-190-72-1	06-013	02-03-2005	SPLIT
040-190-19-1	TO	040-190-42-1	1254422	07-05-1977	SPLIT
040-190-19-1	TO	040-190-41-1	W04275	07-05-1977	SPLIT
040-190-20-1	TO	040-190-37-1	1226003	01-06-1977	SPLIT
040-190-20-1	TO	040-190-35-1	W04037	02-07-1977	SPLIT
040-190-20-1	TO	040-190-36-1	W04037	02-07-1977	SPLIT
040-190-21-1	TO	040-190-59-1	W09654	11-30-1993	SPLIT
040-190-21-1	TO	040-190-60-1	W09654	11-30-1993	SPLIT
040-190-22-1	TO	040-190-27-1	1194229	06-03-1976	SPLIT
040-190-22-1	TO	040-190-28-1	1194229	06-03-1976	SPLIT
040-190-24-1	TO	040-190-67-1	00-029	03-29-1999	SPLIT
040-190-24-1	TO	040-190-68-1	00-029	03-29-1999	SPLIT
040-190-27-1	FROM	040-190-22-1	1194229	06-03-1976	SPLIT
040-190-27-1	TO	040-190-29-1	W03799	10-05-1976	SPLIT
040-190-27-1	TO	040-190-30-1	W03799	10-05-1976	SPLIT
040-190-28-1	FROM	040-190-22-1	1194229	06-03-1976	SPLIT
040-190-29-1	FROM	040-190-27-1	W03799	10-05-1976	SPLIT
040-190-29-1	TO	040-190-31-1	W03825	10-18-1976	SPLIT
040-190-29-1	TO	040-190-32-1	W03825	10-18-1976	SPLIT

MORE?

see attached.

YOLO COUNTY SECURED ROLL

PARCEL INQUIRY

ROLL YEAR: 2007

ADAMS DEKRISTIE
 # ADAMS DEKRISTIE MARIE
 24790 CR 96
 DAVIS CA
 95616
 24790 CR 96
 DAVIS
 10: 7000/ :
 : 0/ :
 CODE 0 26 0 0 0
 YEAR 2007 2006 0 0 0
 LAND 612000
 IMPS 270414
 PP
 EXM 7000
 FXT
 NET 875414

ACREAGE: 5.000
 AG/TPZ :
 ET-AL :
 EXEMPT : 38725
 AUXVALU:
 PPOP :
 VAL HIS:
 : 0/
 : 0/
 0 0 0 0
 0 0 0 0

@:TAX AREA :061013
 1:PARCEL # :040190711
 2:PAR TYPE :10
 3:ROLL YEAR :2007
 4:USE CODE :490
 5:ZONING :A-1
 6:OR1 :0605584 20060209
 7:OR2 :0604281 20060201
 8:ADDR DT CH:
 9:LST NAM CH:02242006
 A:LST VAL CH:04192006
 B:EXM CLAIM :
 C:REAP DATE :08022004
 D:APPR REC #:
 E:BOND # :
 F:NOTIFY? :
 G:BD ORD # :260405
 GROUP 0

DESC1:

DESC2:

DBA :
 SELECT A.P.N : 04019071 REC.# 1214
 Press Enter to Continue

YOLO COUNTY SECURED ROLL

PARCEL INQUIRY

ROLL YEAR: 2007

ADAMS DEKRISTIE
 # ADAMS DEKRISTIE MARIE
 24790 CR 96
 DAVIS CA
 95616
 24850 CR 96
 DAVIS
 : 0/
 : 0/
 CODE 0 14
 YEAR 2007 2006
 LAND 374646
 IMPS 19380
 PP
 EXM
 FXT
 NET 394026

ACREAGE: 14.990
 AG/TPZ :
 ET-AL :
 EXEMPT :
 AUXVALU:
 PPOP :
 VAL HIS:
 : 0/
 : 0/
 0 0 0

@:TAX AREA :061013
 1:PARCEL # :040190721
 2:PAR TYPE :10
 3:ROLL YEAR :2007
 4:USE CODE :495
 5:ZONING :A-1
 6:OR1 :0605584 20060209
 7:OR2 :0604281 20060201
 8:ADDR DT CH:
 9:LST NAM CH:02242006
 A:LST VAL CH:10172005
 B:EXM CLAIM :
 C:REAP DATE :08022004
 D:APPR REC #:
 E:BOND # :
 F:NOTIFY? :
 G:BD ORD # :261010
 GROUP 0

DESC1:

DESC2:

DBA :
 SELECT A.P.N : 04019072 REC.# 1275
 Press Enter to Continue