U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

OMB No. 1660-0008

THE SECONT	
Federal Emergency Management Agency	
National Flood Insurance Program	Ime

ederal Emergency Management Agency	Jan Selvin IOATE	Expires February 28, 2009
ational Flood Insurance Program	Important: Read the instructions on pages 1-8.	206-0459
	SECTION A - PROPERTY INFORMATION	For Insurance Company Use.
1 Building Owner's Name ROMEI	LIA CASTILLO	Policy Number
2009	Init, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Company NAIC Number
MAD/S	State	ZIP Code
Property Description (Lot and Block Numb	Ders, Tax Percel Number, Legal Description, etc.)	95653
Building Use (e.g., Residential Non-Residential	dential, Addition, Accessory, etc.)	1
Lalitude/Longitude: Lat.	long N/A	Zontal Datum: NAD 1927 NAD 1983
Attach at least 2 photographs of the building Building Diagram Number	ng if the Certificate is being used to obtain flood insurance.	zontal Datum: NAD 1927 NAD 1983
For a building with a crawl space or enclose		
 Square footage of crawl space or enclosed 	osure(s) 20.20 so ()	an attached garage, provide e of attached garage 28 sq ft
b) No of permanent flood openings in the enclosure(s) walls within 1.0 foot above	e crawl space or b) No. of permane	ent flood openings in the attached garage
c) Total net area of flood openings in A8.	walls within 1.0) foot above adjacent grade 5
	- Total Hot alog t	of flood openings in A9.b 450 sq in
SECTIO	ON B - FLOOD INSURANCE RATE MAP (FIRM) INFORM	NOITAM
NFIP Community Name & Community Num	nber B2. County Name	B3. State
	YOLO	CA.
4 Map/Panel Number B5. Suffix	B6. FIRM Index B7. FIRM Panel B8. FI	
0423-0387 C	Date Effective/Revised Date Zone MAR 23 (999 A	AO, use base flood depth)
Indicate the source of the Base Flood Elev	vation (BFE) data or base flood depth entered in tem B9.	0 12'
FIS Profile SFIRM Co	ommunity Determined Other (Describe)	
Indicate elevation datum used for BFE in I	llem B9: X NGVD 1929 NAVD 1988 Other (Des	cribe)
is the building located in a Coastal Barrier Designation Date	Resources System (CBRS) area or Otherwise Protected Area (C	DPA)? Yes No
	CBRS OPA	1
SECTION (C - BUILDING ELEVATION INFORMATION (SURVEY R	EOUIDED)
'A new Elevation Certificate will be required	when construction of the building is complete	
Elevations – Zones A1-A30, AE, AH, A (with below according to the building diagram spe	BEEL VE VI-V30 V (with BEEL AR ARIA ARIAE ARIAE), AR/AH, AR/AO. Complete Items C2 a-o.
Benchmark Utilized BM B=38 B	RESET EL 150-84 Vertical Datum NGV	D 1000
Conversion/Comments	Vertical Datum NGV	D 1929
	Check the m	easurement used.
Top of bottom floor (including basemen		
Top of the next higher floor	[eel	meters (Puerto Rico only) meters (Puerto Rico only)
Bottom of the lowest horizontal structur	ral member (V Zones only)	meters (Puerto Rico only)
Attached garage (top of slab) Lowest elevation of machinery or equip	148.9 1 feet	meters (Puerto Rico only)
(Describe type of equipment in Comme	ents)	meters (Puerto Rico only)
) Lowest adjacent (finished) grade (LAG)		meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG	148 6 X leet	meters (Puerto Rico only)
SECTION	D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFI	
certification is to be signed and sealed by a	a land suppeyor angineer or architect authorized to	
,	unishable by line or imprisonment under 18 U.S. Code, Section 1	
Check here if comments are provided on ba	ack of form.	1001. CL NO L. DO TO
KAYMOND DOWELL -	-LAND L.5, 3932	
ZUNER - RAVMOL	UN DOWELL LAND SUDVE	YAD L. (NO. 2932)
17873 CO. RIDOS	ompany Name	EXP. 6/30/000
	ily State ZIP Code	3 / Clony Hoy
nature Company Company	6/20/06 530-662-08	807 XIE OF ON POPE
	Telephone 530-662	OF CALIFORNIA

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 ar		Policy Number
CITY MADISON	Slate CA.	ZIP Code	Company NAIC Number
SECTION D - SURV	EYOR, ENGINEER, OR ARCH	ITECT CERTIFICATION	(CONTINUED)
Copy both sides of this Elevation Certificate for (1)	community official, (2) insurance a	gent/company, and (3) build	ing owner.
Comments			
		ī	
Signature	Dal	e	
			Check here if attachments
SECTION E - BUILDING ELEVATION IN	NFORMATION (SURVEY NOT	REQUIRED) FOR ZONE	AO AND ZONE A (WITHOUT BEE)
ordinance? Yes No Unknow	alable. Check the measurement using and check the appropriate boxe (LAG). crawl space, or enclosure) is	feet meter feet meter feet meter feet meter feet meter A Items 8 and/or 9 (see pag meters above or below the HAG. feet meter A litems 8 and feet meter meter above or below the HAG. feet meter feet m	ion is above or below the highest adjacent s
Property Owner's or Owner's Authorized Represe			2000
RAYMOND DOL	NELL-LAND) SURVEYOR	2 <u>L.5.3932</u> State ZIP Code
Signature Comments	Date 6	JOODLAND	Telephone 530 -662-0807
			Check here if attachmen
	ECTION G - COMMUNITY INF		
The local official who is authorized by law or ordin and G of this Elevation Certificate Complete the	applicable item(s) and sign below.	Check the measurement us	sed in Items G8 and G9
The information in Section C was taken is authorized by law to certify elevation	from other documentation that has information. (Indicate the source a	s been signed and sealed by and date of the elevation dat	a licensed surveyor, engineer, or architect who a in the Comments area below.)
G2 A community official completed Section			
G3 The following information (Items G4G			
G4 Permit Number 206-0459 G5. Da	Sune 18,2006		e Of Compliance/Occupancy Issued UBER 8, 2006
		Improvement	
G8 Elevation of as-built lowest floor (including ba			meters (PR) Datum
G9 BFE or (in Zone AO) depth of flooding at the	building site:	feet	meters (PR) Datum
Local Official's Name LONELL	BUTLER	Title CHIEF B	LILDING OFFICIAL
Control of the state of the sta	DUNTY	Telephone (530)	666-8775
Signature	A	Date November	30,2006
Comments Complies Wi	TH YOLD COUNTY		RDINANCE
The state of the s			Check here if attachme

			S
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