U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires March 31, 2012

Important: Read the instructions on pages 1-9.

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	Building Owner's Mana		SECTIO	ON A - PROPE	KIY INFORMA	TION	7.04	tör (instifation Com Rolley Nümber	party Use##
	Building Owner's Name RESOURCE SEE	DS, INC.		C. N				ompany VAIS NU	
142	Building Street Address 39438 STATE HIGH	s (including Apt., HWAY 113	, Unit, Suite, and/or Blo			•		Code	(IDE)
	City WOODLAND				State CA		956		
A3.	Property Description (L A.P.N. 056-130-0	ot and Block Nu 16	mbers, Tax Parcel Nui	mber, Legal Desc	cription, etc.)				
A4.	Building Use (e.g., Res	idential, Non-Re	esidential, Addition, Acc	cessory, etc.) <u>NC</u>	ON-RESIDENTI	AL			1
A5. Latitude/Longitude: Lat. 38.79338° Long121.78710° Horizontal Datum: NAD 1927 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.							n:	NAD 1983	
A7.	Bullding Diagram Numl	ber 5		•				1	
A8.	For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) 480 sq ft A9. For a building with an all square footage of a Square footage of a								/A sq ft
	b) No. of permanent fi	lood openings in	the crawlspace or		b) No.	of permane	nt flood ope	enings in the attacl	hed garage /A
	enclosure(s) within c) Total net area of flo	1.0 foot above a	adjacent grade 6	183 sq in		in 1.0 foot a		nings in A9.b	A sq in
	d) Engineered flood o	penings?		94					No
		SEC	TION B - FLOOD IN	ISURANCE RA	TE MAP (FIRM	1) INFORM			
B1.	NFIP Community Name YOLO COUNTY UN	& Community N INCORPORAT		32. County Name	YOLO		B3.	State CA	
B4	4. Map/Panel Number	B5. Suffix	B6. FIRM Index		M Panel evised Date	B8. Fl Zone		B9. Base Flood El	
	060423 0300	С	Date 04/02/02		02/02	A	` '	40.0 (SEE S	' ' '
10.	Indicate the source of t	he Base Flood B	Elevation (BFE) data or	r base flood depth	n entered in Item	B9.			
	FIS Profile] FIRM	Community Determine	ed 🔳 Oth	ner (Describe) U	SGS QUA	D MAP - E	L DORADO BE	ND
311.	Indicate elevation datu	m used for BFE	in Item B9: 🔳 NGVD	1929 🗌 NA		Other (Des			
312.	Is the building located i	in a Coastal Bar	rier Resources System	(CBRS) area or	Otherwise Protect	ated Area (C)PA)?	Yes 🔳	No
	Designation Date			` [] ćppe [T O D A		•	ليا ليا	
				_ CBRS [OPA		·		
		SECTIO		CBRS _	J OPA			<u>.</u>	
31.	Ruilding elevations are b	pased on:	ON C - BUILDING EI	LEVATION INF	OPA ORMATION (S uilding Under Cor	URVEY R	EQUIRED	<u>.</u>	
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MPORTANT: In these spaces, copy the corre Building Street Address (including Apt., Unit, Suite, and	isponalud liitotilianoti itom seen		orlidamice Company Otto
Hilling Offeet Various (House and Least Ann.)	d/or Bldg. No.) or P.O. Route and Box N	lo.	alicy (Alangeric
39438 STATE HIGHWAY 113	State	ZIP Code	ampany NAICIXUmbop (# 🎸 🚉
MOODI AND	CA ARCHITECT	95695	JIIEN\
SECTION D - SURVEY	OR, ENGINEER, OR ARCHITECT	CERTIFICATION (CONTI	(OLO)
copy both sides of this Elevation Certificate for (1) com	nmunity official, (2) insurance agent/com	npany, and (3) building owner.	
B.F.E. FLOOD ELEVATION WAS D	ETERMINED FROM PROFILES O	F STATE HIGHWAY 113 S	SOUTH OF PROPOSED
TE. THE HIGHWAY IS SHOWN TO BE OUT	OF FLOOD ZONE "A" ON FIRM. I	LOWEST MACHINERY IS	THE BOTTOM
F THE ELECTRICAL PANEL.	7		
Signature //	Date 11/05/200	9	Check here if attachment
SECTION E - BUILDING ELEVATION INFO	RMATION (SURVEY NOT REQUI	RED) FOR ZONE AO AND	ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), complete Items E and C. For Items E1-E4, use natural grade, if availab E1. Provide elevation information for the following a grade (HAG) and the lowest adjacent grade (LA a) Top of bottom floor (including basement, crav b) Top of bottom floor (including basement, crav b) Top of bottom floor (including basement, crav E2. For Building Diagrams 6-9 with permanent flood (elevation C2.b in the diagrams) of the building E3. Attached garage (top of slab) is N/A. E4. Top of platform of machinery and/or equipment E5. Zone AO only: If no flood depth number is avail ordinance? Yes No Unknown. T	Ind. Check the appropriate boxes to show (G). Wispace, or enclosure) is N/A. Wispace, or enclosure) is N/A. If openings provided in Section A Items (is N/A. feet meters above or servicing the building is N/A. Itable, is the top of the bottom floor elevation of the local official must certify this information.	feet meters above and meters above the meters above and/or 9 (see pages 8-9 of Ir below the below the HAG. feet meters above ated in accordance with the contion in Section G.	re or below the highest adjacent e or below the HAG. e or below the LAG. structions), the next higher floor HAG. re or below the HAG. mmunity's floodplain managemen
The property owner or owner's authorized representa or Zone AO must sign here. The statements in Section	tive who completes Sections A, B, and I	E for Zone A (without a FEIVIA) of my knowledge.	-issued of confinding-located by =
or Zone AO must sign here. The statements in Section Property Owner's or Owner's Authorized Representat	tive's Name	1	
N/A		State	ZIP Code
Address N/A	City N/A	. <u>N/A</u>	N/A
Signature	Date N/A	Telephone	N/A
Comments			
N/A			Charle hare if attachm
			Check here if attachm
	ION G - COMMUNITY INFORMAT	ION (OPTIONAL)	•
	to the state of th	in management ordinance car	complete Sections A, B, C (or E)
he local official who is authorized by law or ordinance and G of this Elevation Certificate. Complete the appliance. The information in Section C was taken from is authorized by law to certify elevation information.	e to administer the community's floodpla icable item(s) and sign below. Check th n other documentation that has been sig mation, (Indicate the source and date o or a building located in Zone A (without a	in management ordinance can be measurement used in Items and sealed by a licensed of the elevation data in the Cor a FEMA-issued or community-	surveyor, engineer, or architect w nments area below.)
the local official who is authorized by law or ordinance and G of this Elevation Certificate. Complete the applient of the information in Section C was taken from is authorized by law to certify elevation information. A community official completed Section E formation (Items G4-G9) is presented.	e to administer the community's floodpla icable item(s) and sign below. Check the nother documentation that has been sign mation, (Indicate the source and date of or a building located in Zone A (without a provided for community floodplain mana.	in management ordinance can be measurement used in Items and sealed by a licensed of the elevation data in the Cor a FEMA-issued or community- agement purposes.	surveyor, engineer, or architect w nments area below.) issued BFE) or Zone AO.
he local official who is authorized by law or ordinance and G of this Elevation Certificate. Complete the application of the information in Section C was taken from is authorized by law to certify elevation information. A community official completed Section E formation in the following information (Items G4-G9) is part of the following information (Items G4-G9).	e to administer the community's floodpla lcable item(s) and sign below. Check th n other documentation that has been sig mation. (Indicate the source and date o or a building located in Zone A (without a provided for community floodplain mana	in management ordinance can be measurement used in Items and sealed by a licensed of the elevation data in the Cor a FEMA-issued or community-	surveyor, engineer, or architect w nments area below.) issued BFE) or Zone AO.
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Building Photographs See Instructions for Item A6.

		DO D. A. A. ID. M.	For Insurance Company Use: Policy Number
Building Street Address (include 39438 STATE HIGHWAY 113	ding Apt., Unit, Suite, and/or Bldg. No.) or	1 Oldy Hamber	
City WOODLAND	State CA	ZIP Code 95695	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 on the reverse.

FRONT VIEW



Building Photographs Continuation Page

For Insurance Company Use: Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number 39438 STATE HIGHWAY 113 Company NAIC Number ZIP Code State City WOODLAND 95695 CA

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."

REAR VIEW

