# U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008

Expiration Date: November 30, 2022

# **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9.

BP2019-0455

Copy all pages of this Elevat	ion Certificate and all attachme	ents for (1) community offic	ial, (2) insurance agen	t/company, and (	<ol><li>building owner.</li></ol>		
SECTION A - PROPERTY INFORMATION				FOR INSURANCE COMPANY USE			
A1. Building Owner's Name				licy Number:			
DALHAR FARMS		// BI   N   N   B   O	Deuterand				
Box No.	ess (including Apt., Unit, Suite	e, and/or Bldg. No.) or P.O.	Co	mpany NAIC Nu	mber:		
16626 COUNTY I	ROAD 117	E N					
City		State	ZIF	Code			
90900 SS000 SP 20040 SP 100	WEST SACRAMENTO CA 95691						
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  ASSESSOR'S PARCEL NUMBER: 057-160-009-000							
A4. Building Use (e.g., R	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL						
√A5. Latitude/Longitude:	Lat. 38°41'47.76"	Long121°38'15.68"	Horizontal Datum: [	NAD 1927 [	■ NAD 1983		
A6. Attach at least 2 photo	tographs of the building if the	Certificate is being used to	obtain flood insurance	e.			
A7. Building Diagram Nur	mber 7				V		
A8. For a building with a	crawlspace or enclosure(s):						
V	f crawlspace or enclosure(s)	<b>3,200</b> sq ft					
	nent flood openings in the cra		ithin 1.0 foot above ad	jacent grade	22		
c) Total net area of fl		to the					
d) Engineered flood							
	Va) Engineered 1100d Openings?						
A9. For a building with an attached garage:							
a) Square footage of	(a) Square footage of attached garage N/A sq ft						
Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade							
C) Total net area of flood openings in A9.b N/A sq in							
d) Engineered flood							
	SECTION B - FLOOD IN	NSURANCE RATE MAP	(FIRM) INFORMATION	DN			
B1. NFIP Community Nan		B2. County Name		B3, S	tate		
	NINCORPORATED 06042		YOLO	V	CA		
	Suffix B6. FIRM Index	B7. FIRM Panel	B8. Flood Zone(s)	B9. Base Floor			
Number	Date	Effective/ Revised Date	De. 1 1000 2011c(3)	(Zone AO, Flood Dept	use Base		
06113C 0460	H 05/16/2012	05/16/2012	AE	36	6.0'		
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/Source:							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?							
Designation Date: CBRS OPA							
CONSTRUCTOR Date.							
1							

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	IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURANCE COMPANY USE		
I	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.				Policy Number:		
	16626 COUNTY ROAD 117						
1	City	State	ZIP Code		Company NAIC Number		
١.	WEST SACRAMENTO	CA	95691				
	SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
	C1. Building elevations are based on:	Construction Drawings*	Building Under C	onstru	ction* Finished Construction		
	*A new Elevation Certificate will be required when construction of the building is complete.						
	C2. Elevations – Zones A1–A30, AE, AH, A Complete Items C2.a–h below according Benchmark Utilized: NGS SM NO. 1	ng to the building diagram spe	vith BFE), AR, AR/ cified in Item A7. Ir atum: <b>N.A.V.D. 1</b>	Puerto	AE, AR/A1–A30, AR/AH, AR/AO. o Rico only, enter meters.		
- 1	Indicate elevation datum used for the e	elevations in items a) through h	) below.		<u> </u>		
	☐ NGVD 1929 <b>■</b> NAVD 1988		. 68 9 394 50				
	Datum used for building elevations mus	st be the same as that used fo	the BFE.				
	(a) Top of bottom floor (including baser	ment ergulances er anglegur	(floor) 33	9	Check the measurement used.		
		fient, crawispace, or enclosure	43	• ——	feet meters		
	b) Top of the next higher floor		N/A	• —	feet meters		
	c) Bottom of the lowest horizontal stru	ctural member (V Zones only)	N/A	•	feet   meters		
	d) Attached garage (top of slab)		27				
	Lowest elevation of machinery or expectation (Describe type of equipment and logical describes type)	quipment servicing the buildinຸ cation in Comments)		•	feet  meters		
	f) Lowest adjacent (finished) grade ne	ext to building (LAG)	33	. —	feet  meters		
	g) Highest adjacent (finished) grade n	ext to building (HAG)	33	• ——	feet meters		
	h) Lowest adjacent grade at lowest ele structural support	evation of deck or stairs, includ	ing33	. <u>5</u>	feet meters		
	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.						
	Were latitude and longitude in Section A pro			No	Check here if attachments.		
ì	Certifier's Name	License Numb	er				
	NEIL U. BUSCH		L.S. 9157		LANG		
	Title ASSOCIATE CIVIL ENGINEER				LAND SUPLAND SUPLAND		
	Company Name				ENSED LINE SUPLE OF		
	LAUGENOUR AND MEIKLE				( ( Neil Busc D ) )		
	Address						
	608 COURT STREET				L.S. 9157 TE OF CALIFORNIA		
	City WOODLAND	State CA	ZIP Code <b>95695</b>		OF CALITY		
	Signature	Date	Telephone				
	Neil Busch	04/28/2022	100	0)662			
	Copy all pages of this Elevation Certificate an	d all attachments for (1) commi	ınity official, (2) insı	irance a	agent/company, and (3) building owner.		
	Comments (including type of equipment and		-				
	LOWEST MACHINERY IS AN ELECTR				3.5		
V	THE FIRST FOOT OF EACH OPENING	WAS CREDITED TOWAR	D KEQUIKED FI	LOOD	OPENINGS.		

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IMPORTANT: In these spaces, copy the corresponding in	FOR INSURANCE COMPANY USE					
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16626 COUNTY ROAD 117						
City State	ZI	P Code	Company NAIC Number			
· ·	CA	95691				
	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, crawlspace, or enclosure) is	<u>N/A</u>	_	s above or below the HAG.			
b) Top of bottom floor (including basement, crawlspace, or enclosure) is	N/A .	feet meter	s above or below the LAG.			
E2. For Building Diagrams 6–9 with permanent flood opening the next higher floor (elevation C2.b in	gs provided in Sec N/A					
the diagrams) of the building is	<del></del>	_	s above or below the HAG.			
E3. Attached garage (top of slab) is	N/A	_	s above or below the HAG.			
E4. Top of platform of machinery and/or equipment servicing the building is	N/A	_	s above or below the HAG.			
E5. Zone AO only: If no flood depth number is available, is the floodplain management ordinance? Yes No	ne top of the bottor Unknown. T	m floor elevated in ac he local official must o	cordance with the community's certify this information in Section G.			
SECTION F - PROPERTY OWNER (	OR OWNER'S RE	PRESENTATIVE) CE	RTIFICATION			
The property owner or owner's authorized representative who	completes Section	ons A, B, and E for Zo	ne A (without a FEMA-issued or			
community-issued BFE) or Zone AO must sign here. The state Property Owner or Owner's Authorized Representative's Name	<u> </u>	S A, B, and E are cor	lect to the best of my knowledge.			
N/A						
Address	City	Sta	ate ZIP Code			
N/A	N/A		N/A N/A			
Signature	Date	Te	lephone			
X - 1 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0	NI/A					
	N/A		N/A			
Comments	N/A		N/A			
	N/A	-	N/A			
Comments N/A	N/A	-	N/A			
	N/A	*	N/A			
	N/A	-	N/A			
	N/A	~	N/A			
	N/A	-	N/A			
	N/A	-	N/A			
	N/A		N/A			
	N/A		N/A			
	N/A		N/A			
	N/A		N/A			
	N/A		N/A			
	N/A		N/A			
	N/A		N/A			
	N/A		N/A			
	N/A		N/A			
	N/A		N/A  ☐ Check here if attachments.			

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16626 COUNTY ROAD 117			-		
City	State	ZIP Code	Company NAIC Number		
WEST SACRAMENTO	CA	95691			
SECTIO	N G - COMMUNITY INFO	RMATION (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–G10. In Puerto Rico only, enter meters.					
	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation				
G2. A community official completed Section or Zone AO.	on E for a building located i	n Zone A (without a FEM	A-issued or community-issued BFE)		
G3. The following information (Items G4–	G10) is provided for commu	ınity floodplain managem	ent purposes.		
G4. Permit Number	G5. Date Permit Issued		Date Certificate of		
BP2019-0455	9-24-2020	5	Compliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction  Sub	stantial Improvement			
G8. Elevation of as-built lowest floor (including of the building:	g basement) 43	feet	meters Datum <u>NAVD88</u>		
G9. BFE or (in Zone AO) depth of flooding at t	the building site:34	feet	meters Datum		
G10. Community's design flood elevation:	_ 37	feet	meters Datum		
Local Official's Name	Tit	e Flood Adumn /	'CBO		
Community Name	Те	lephone 530-666-9	1037		
Signature Date 5-8-22					
Comments (including type of equipment and loc	cation, per C2(e), if applicab	le)			
			☐ Check here if attachments.		

#### **BUILDING PHOTOGRAPHS**

### **ELEVATION CERTIFICATE**

See Instructions for Item A6.

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City	State	ZIP Code	Company NAIC Number
WEST SACRAMENTO	CA	95691	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

## Photo One Caption FRONT VIEW (TAKEN 05/12/2021)



Photo Two

Photo Two Caption LEFT SIDE & REAR VIEWS (TAKEN 05/12/2021)

### **BUILDING PHOTOGRAPHS**

### **ELEVATION CERTIFICATE**

**Continuation Page** 

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16626 COUNTY ROAD 117			
City	State	ZIP Code	Company NAIC Number
WEST SACRAMENTO	CA	95691	

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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

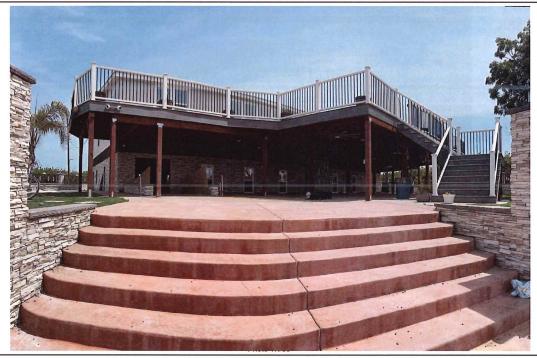


Photo One Caption NEW FRONT VIEW (TAKEN 04/27/2022)

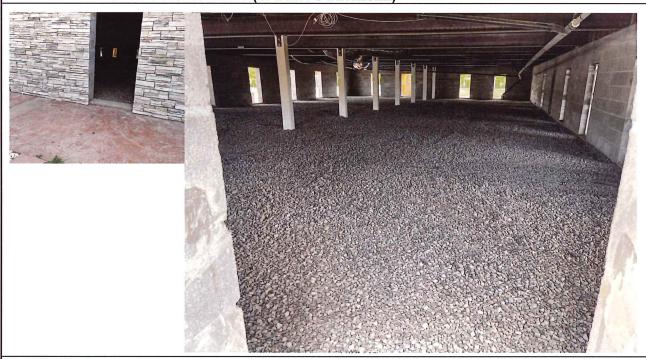


Photo Two Caption BOTTOM LEVEL VIEW (TAKEN 04/27/2022)