

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME: GARY R. WERTS

BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.: 503 EAST OLE MAVERICK ROAD

CITY: CHEYENNE STATE: WYOMING ZIP CODE: 82009

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): LOTS 2 AND 3 BLOCK 10 ROUNDUP HEIGHTS LARAMIE COUNTY, WYOMING

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.): ACCESSORY

LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###.###" or ##.#####): _____ HORIZONTAL DATUM: NAD 1927 NAD 1983 SOURCE: GPS (Type): _____ USGS Quad Map Other _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER: LARAMIE COUNTY UNINCORPORATED B2. COUNTY NAME: LARAMIE B3. STATE: WYOMING

B4. MAP AND PANEL NUMBER: <u>560029 0505</u>	B5. SUFFIX: <u>D</u>	B6. FIRM INDEX DATE: <u>Nov. 15 1977</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE: <u>SEPT 20 1991</u>	B8. FLOOD ZONE(S): <u>A</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding): <u>12175</u>
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B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9: FIS Profile FIRM Community Determined Other (Describe): CHILDERS DRAW NORTH CHEYENNE, WY

B11. Indicate the elevation datum used for the BFE in 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: _____

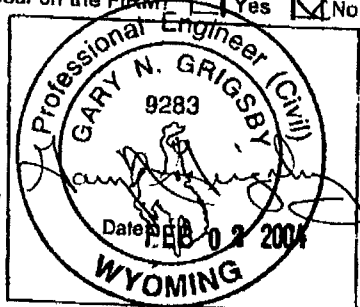
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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 _____ (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, ARIA, AR/AE, ARIA1-A30, ARIA/H, AR/AO
Complete Items C3.a-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: CITY OF CHEYENNE Conversion/Comments: _____
Elevation reference mark used: CITY MON. YELLOWSTONE Does the elevation reference mark used appear on the FIRM? Yes No

<input checked="" type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>6180</u>	<u>65</u>	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 (Describe in a Comments area.)	_____	_____	ft. (m)
<input checked="" type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	<u>6179</u>	<u>9</u>	ft. (m)
<input checked="" type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	<u>6180</u>	<u>4</u>	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 C3.h	_____	_____	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: GARY N. GRIGSBY LICENSE NUMBER: Wyo. REG. 9283 P.E.

TITLE: PRESIDENT COMPANY NAME: WESTERN R.E.D. LTD.

ADDRESS: 5908 YELLOWSTONE RD. SUITE B CITY: CHEYENNE STATE: WYOMING ZIP CODE: 82009

SIGNATURE: [Signature] DATE: FEB. 2 2004 TELEPHONE: (307) 632-5656

IMPORTANT: In these spaces, copy the corresponding information from Section A.

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 503 EAST OLE MAVERICK ROAD		For Insurance Company Use:	
CITY CHEYENNE		STATE WYOMING	ZIP CODE 82009
		Policy Number	
		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

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) Check here if attachments

For Zone AO and Zone A (without BFE), complete Items E1. through E5. If the Elevation Certificate is intended for use as supporting information for a LCMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number ____ (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 ____ ft. (m) ____ in. (cm) ____ above or ____ below (check one) the highest adjacent grade. (Use natural grade, if available.)
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ____ ft. (m) ____ in. (cm) above the highest adjacent grade. Complete Items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is ____ ft. (m) ____ in. (cm) ____ above or ____ below (check one) the highest adjacent grade. (Use natural grade, if available.)
- E5. 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, C (Items C3.h and C3.i only), 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, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

TARY R. WERTS

ADDRESS 503 EAST OLE MAVERICK ROAD	CITY CHEYENNE	STATE WY.	ZIP CODE 82009
SIGNATURE	DATE	TELEPHONE (307) 632-4926	
COMMENTS			

SECTION G - COMMUNITY INFORMATION (OPTIONAL) Check here if attachments

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:

G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft. (m) Datum: _____
 _____ ft. (m) Datum: _____

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

Check here if attachments

Replaces all previous editions

LARAMIE
COUNTY

APR 23 2009

PLANNING & DEVELOPMENT
OFFICE

SUMMIT ENGINEERING, LLC

5907 Townsend Place
Cheyenne, WY. 82009
307-637-0681

April 23, 2009

Mr. Gary Kranse, Planning Director
Laramie County
310 West 19th Street, Suite 400
Cheyenne, WY. 82001


Re: Site Inspection of FEMA Driveway Culvert
A Portion of NE-1/2, Section 20
Township 15 N, Range 66 W

Dear Mr. Kranse:

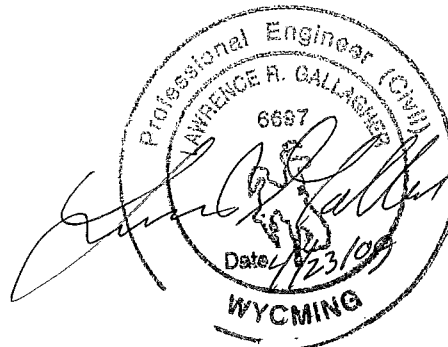
I performed a site inspection today with Mike Wiggam the property owner of the above described property. Mr. Wiggam's culvert crossing of the floodplain was installed in substantial compliance with the recommendations outlined in my letter dated January 6, 2003.

Should you have any questions or wish to discuss this further, please feel free to contact me.

Sincerely;



Larry R. Gallagher, P.E.



FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME
Tary R Werts

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.
503 E. Ole Maverick

CITY
Cheyenne

STATE
Wyoming

ZIP CODE
82009

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
Lots 2 & 3, Block 10 Roundup Heights, Laramie County Wyoming

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)
Accessory

ATTITUDE/LONGITUDE (OPTIONAL)
#° - ##' - ###" or ##.####"

HORIZONTAL DATUM:
 NAD 1927 NAD 1983

SOURCE: GPS (Type): Static
 USGS Quad Map Other

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

1. NFIP COMMUNITY NAME & COMMUNITY NUMBER
Laramie County Unincorporated

2. COUNTY NAME
Laramie

3. STATE
WY

4. MAP AND PANEL NUMBER 560029 0505	5. SUFFIX D	6. FIRM INDEX DATE Nov. 15, 1977	7. FIRM PANEL EFFECTIVE/REVISED DATE Sept. 20, 1991	8. FLOOD ZONE(S) A	9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 6175
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0. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. Childs Draw, North Cheyenne, WY
 FIS Profile FIRM Community Determined Other (Describe): Detailed Floodplain Study 4/29

1. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):

2. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
Designation Date:

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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.

Building Diagram Number A (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.)

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 C3.a-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 City of Cheyenne
Conversion/Comments CP-Lake, CP-Yellowstone

Elevation reference mark used CP-Lake, CP-Yellowstone 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 (Describe in a Comments area.)	_____	ft. (m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	_____	ft. (m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	6178	ft. (m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	6181	ft. (m)
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h _____ sq. in. (sq. cm)		

License Number, Embossed Seal, Signature, and Date

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CERTIFIER'S NAME
Gary N. Grigsby

LICENSE NUMBER
WY Reg. 9283 PE

TITLE
President

COMPANY NAME
Western R & D, Ltd.

ADDRESS
5908 Yellowstone Road, Suite B

CITY
Cheyenne, Wyoming

STATE
Wyoming

ZIP CODE
82009

SIGNATURE
Gary N. Grigsby

DATE
8/10/2003

TELEPHONE

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
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Accessory

LATITUDE/LONGITUDE (OPTIONAL)
(##-##-## or ##.###)

HORIZONTAL DATUM:
 NAD 1927 NAD 1983

SOURCE: GPS (Type): Static
 USGS Quad Map Other

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Laramie County Unincorporated		B2. COUNTY NAME Laramie		B3. STATE WY	
B4. MAP AND PANEL NUMBER 560029 0505	B5. SUFFIX D	B6. FIRM INDEX DATE Nov. 15, 1977	B7. FIRM PANEL EFFECTIVE/REVISED DATE Sept. 20, 1991	B8. FLOOD ZONE(S) A	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 6175

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Designation Date:

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*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number A (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, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO
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Datum: City of Cheyenne Conversion/Comments:

Elevation reference mark used CP-Lake, CP-Yellowstone Elevation reference mark used appear on the FIRM? Yes No

a) Top of bottom floor (including basement or enclosure) _____ ft.(m)

b) Top of next higher floor _____ ft.(m)

c) Bottom of lowest horizontal structural member (V zones only) _____ ft.(m)

d) Attached garage (top of slab) _____ ft.(m)

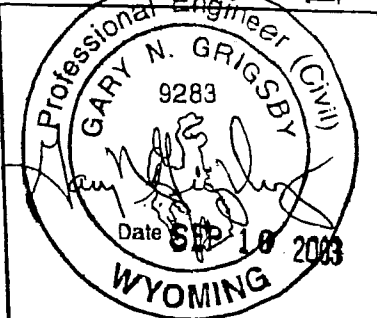
e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) _____ ft.(m)

f) Lowest adjacent (finished) grade (LAG) _____ 6178 ft.(m)

g) Highest adjacent (finished) grade (HAG) _____ 6181 ft.(m)

h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade _____

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CERTIFIER'S NAME
Gary N. Grigsby

TITLE
President

ADDRESS
5908 Yellowstone Road, Suite B

SIGNATURE

LICENSE NUMBER
WY Reg. 9283 PE

COMPANY NAME
Western R & D, Ltd.

CITY
Cheyenne, Wyoming

STATE
82009

DATE

TELEPHONE



ZONING/ADDRESS APPLICATION

LARAMIE COUNTY PLANNING DEPARTMENT
310 W 19TH STREET SUITE 400
CHEYENNE, WY 82001 (307) 633-4303 FAX (307) 633-4519



Development Permit Complete

ATTACH COPY OF PROPERTY DEED AND PLOT PLAN OF STRUCTURE AND SITE INCLUDING:

- () Property lines (lot size) () Surrounding roads () Well and Septic location () Location of structure on property
- () Setback distances () Exterior dimensions () Driveway location () Other existing structures () North arrow

Application For: Zoning Certificate [] Rural Address (Outside Zoned Area)

Application Date 08-06-03

Certificate No. 03-500861

Applicant Tary R. Werts

Telephone (307) 632-4926

Mailing Address 503 East Ole Maverick Rd

Owner (if different from Applicant) _____

Application to: Place: HUD _____ UBC _____ OTHER _____ Build Residential Accessory Commercial

Structure Type Metal Building Structure Size 1700 Sq. Ft. *See Site plan requirements for commercial
Will this structure have water and sewer services? [] Yes No

Lot Size _____ Acres 51558 Sq. Ft. Estimated Cost of Structure \$ 12000

Estimated Completion Date Dec 31, 2003 Location of Structure Staked: [] Yes No-Call When Location Is Staked.

Legal Description

Lot Split _____ Lot 243 Block/Tract 10 Subdivision Roundup Heights
Division _____ Section _____ Township _____ Range _____

Tary R. Werts 08-06-03
Signature of Applicant Date

Applicant certifies that the above information is true and correct to the best of his/her knowledge.

Zoning District AR Map Page # D34 Floodplain Development Permit yes Firm Map 505

Notes/Conditions _____

Site Address 503 East Ole Maverick Rd New? NO

Applicant shall place house number on the structure and/or at driveway. Numbers shall be a minimum of 6" high and shall be of a reflective material. Contact U S Post Office for mailbox location.

Status approved BOARD OF COUNTY COMMISSIONERS by Cathy Neathen

This certificate is issued subject to full compliance with the terms of the application and the zoning regulations and/or addressing. The issuance of this certificate/address does not guarantee issuance of a well or a small wastewater permit.

Issue Date: _____ Expiration date _____ Certificate must be renewed if construction is not started by this date

Receipt No. 1-2603 Amount \$ _____ GIS Entry _____ Final Inspection 10-13-03

