FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077 Expires July 31, 2002

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ELEVATION CERTIFICATE

| important: Read the | instructions on pages 1 - 7. | | | | |
|---|--|---|--|--|--|
| SECTION A - PROPER | For Insurance Company Use: | | | | |
| BUILDING OWNER'S NAME | | Policy Number | | | |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No. 604 E. ALUSON ROAD | .) OR P.O. ROUTE AND BOX NO. | Company NAIC Number | | | |
| CITY | STATE | ZIP CODE | | | |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, | Wyomind. | 82007 | | | |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, | Legal Description, etc.) | | | | |
| LOT 2.9 Black 1 Sunridge Sc BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc | with 2nd filing | | | | |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Sccessory, etc. R S 1 d to t 1 21 | | | | | |
| LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM | | | | | |
| (##°-##'-##.###" or ##.#####")NAD 1927 NAD | 1983 LH USGS Quad Ma | p Other: | | | |
| N 41° 06'35" N 104° 47'27" | | | | | |
| SECTION B - FLOOD INSURAN | NCE RATE MAP (FIRM) INFORMATION | N | | | |
| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUN | NTY NAME | B3. STATE | | | |
| | amie. | Wyomind | | | |
| B4. MAP AND PANEL B5. SUFFIX B6, FIRM INDEX | B7. FIRM PANEL CTIVE/REVISED DATE 1994 B8. FLOOD ZONE(S) | B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 5996.4 | | | |
| 310. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. | | | | | |
| FIS Profile FIRM 👘 🔀 Community Determ | ined Other (Describe): | | | | |

|___| FIS P B11. Indicate the elevation datum used for the BFE in B9: 🔀 NGVD 1929 |___| NAVD 1988 |___| Other (Describe): ___

| | a Coastal Barrier Resources System | (CBRS) area or Otherwise Prote | cted Area (OPA)? L_ Yes | 📉 No |
|-------------------|------------------------------------|--------------------------------|-------------------------|------|
| Designation Date: | P/co- | | | |
| | | | | |

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on; | |Construction Drawings* | |Building Under Construction* KIFinished 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, 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 _____ Conversion/Comments NINE

| Elevation reference mark used D | oes the elev | ation reference | e mark | used | appear c | n her iki | Y | 'es I | NO |
|--|--------------|-----------------|------------|----------|-------------------|-------------------|--|---------|----|
| a) Top of bottom floor (including basement or enclosure) | ≥) _ | 5978 | . 5 | ft.(m) | r 7 | -cional L | and R | | |
| b) Top of next higher floor | _ | 5000 | . 2 | ft.(m) 🖞 | | VIV T | Parte | | |
| C) Bottom of lowest horizontal structural member (V zon | nes only) 🔄 | | - •i | ft.(m) ' | | 300 | 7 2 | 4 | |
| d) Attached garage (top of slab) | _ | | - • | ft.(m) | The second second | Land Co | 7 Q. | ار ایشا | |
| e) Lowest elevation of machinery and/or equipment | | 6000 | - | | | | , , , | ZZ Z | \$ |
| servicing the building (Describe in a Comments area | a.) | | <u>2</u> _ | ft.(m) | 1810 | - W- | / | | |
| f) Lowest adjacent (finished) grade (LAG) | - | 5996 | | ft.(m) | 25K | - | NI. | 2002 | |
| g) Highest adjacent (finished) grade (HAG) | | 5998 | . D | ft.(m) | 2.4 | Date C | | Ligz | |
| D h) No. of permanent openings (flood vents) within 1 ft. a | above adjac | ent grade 🔟 💪 | | | | And the second of | and the second s | | |
| i) Total area of all permanent openings (flood vents) in | C3.h 🕿 🕇 | 🖌 'sa, in, (sa | . cm) | | - 10 | WY MEL | 110 ~ | ¢. | |

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.

| LARAY T. PERRY L.S. | | | |
|----------------------------------|-----------------------|---------------------------------|--|
| TITLE OWNER (LAND SURVEYOR) | TERRESTRIAL SURVEYING | CMAPPING CO. | |
| ADDRESS 1127 Terry Ranch Road | CITY Cheyenne | STATE ZIP CODE Wyoming 82007 | |
| SIGNATURE | B JULY 2002 | TELEPHONE (307) 634.9360 | |

REPLACES ALL PREVIOUS EDITION S

| IMPORTANT: In these spaces, copy the corresponding in | | | For Insurance Company Use: |
|---|--|--|----------------------------------|
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bl | idg. No.) OR P.O. ROUTE AND | BOX NO. | Policy Number |
| Cheyenne W | state / yoming | ZIP CODE 82007 | Company NAIC Number |
| SECTION D - SURVEYOR, ENGINE | ER, OR ARCHITECT CERT | FIFICATION (CON | TINUED) |
| Copy both sides of this Elevation Certificate for (1) community | y official, (2) insurance agen | l/company, and (3 |) building owner. |
| COMMENTS The 100 year flood plane elevation | was determined | from "Alles | Draw Master |
| Drainage Plan" prepared in Nov. | 1988 on page | 2 · 8, +=b/ | 2-4, the eley. |
| 37 Sta. 166+00 | | | |
| | | | Check here if attachments |
| SECTION E - BUILDING ELEVATION INFORMATION (S | SURVEY NOT REQUIRED) | FOR ZONE AO A | ND ZONE A (WITHOUT BFE) |
| For Zone AO and Zone A (without BFE), complete Items E1. the information for a LOMA or LOMR-F, Section C must be complete the complete | leted. | , | |
| E1. Building Diagram Number 8 (Select the building diag | ram most similar to the build | ling for which this a | certificate is being completed - |
| see pages 6 and 7. If no diagram accurately represents the E2. The top of the bottom floor (including basement or enclosure) | | | n.(cm) 📕 above or 🔲 below |
| (check one) the highest adjacent grade. (Use natural grad | de, if available.) | | |
| E3. For Building Diagrams 6-8 with openings (see page 7), the | e next higher floor or elevate | d floor (elevation b |) of the building is |
| 1 ft.(m) Z in.(cm) above the highest adjacent gr | ade. Complete Items C3.h | and C3.i on front o | f form. |
| E4. For Zone AO only: If no flood depth number is available, i floodplain management ordinance? Yes No _ | Is the top of the bottom floor | elevated in accord | ance with the community's |
| SECTION F - PROPERTY OWNER | (OR OWNER'S REPRESEN | TATIVE) CERTIF | ICATION |
| The property owner or owner's authorized representative who | | | |
| (without a FEMA-issued or community-issued BFE) or Zone | AO must sign here. The sta | tements in Section | s A, B, C, and E are correct to |
| the best of my knowledge. PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENT | TATIVE'S NAME | | |
| ADDRESS | CITY | STATE | ZIP CODE |
| SIGNATURE | DATE | TELEPH | ONE |
| COMMENTS | | | |
| | | , <u>,,,,,,,,,,,,,,,,,,,,,,,,</u> ,,,,,,,, | Check here if attachments |
| SECTION G - COM | MUNITY INFORMATION (C | PTIONAL) | |
| The local official who is authorized by law or ordinance to adm | inister the community's floor | dplain manageme | nt ordinance can complete |
| Sections A, B, C (or E), and G of this Elevation Certificate. Co | mplete the applicable item(| s) and sign below. | |
| G1.] The information in Section C was taken from other do engineer, or architect who is authorized by state or lo | cumentation that has been s | signed and emboss | sed by a licensed surveyor, |
| elevation data in the Comments area below.) | car law to certify elevation in | normation. (Indica | ite the source and date of the |
| G2. A community official completed Section E for a building | ng located in Zone A (withou | t a FEMA-issued o | r community-issued BFE) or |
| Zone AO. | | | - , |
| G3. The following information (Items G4-G9) is provided for | or community floodplain mar | nagement purpose | IS. |
| G4. PERMIT NUMBER G5. DATE PERMIT ISSUE | D G6. DAT | E CERTIFICATE OF | COMPLIANCE/OCCUPANCY |
| G7. This permit has been issued for: V New Construction | I Substantial Improve | ment | ····· |
| G8. Elevation of as-built lowest floor (including basement) of the | ·• | | ft.(m)Datum: |
| G9. BFE or (in Zone AO) depth of flooding at the building site | is: | <u> </u> | ft.(m)Datum; |
| LOCAL OFFICIAL'S NAME | TITLE | | |
| COMMUNITY NAME | TELEPHONE | | |
| SIGNATURE | DATE | | |
| COMMENTS | | | |
| | | | |
| | ······································ | ····· | |
| · · · · · · · · · · · · · · · · · · · | ····· | | Check here if attachments |
| FEMA Form 81-31 .II II 00 | | REPI / | CES ALL PREVIOUS EDITIONS |

Lot29 Block 1

1 2 2

Sunridge South 2nd filing 604 E. Allison Rord



| APR 27-02 05:3 | 6 AM 329 | 3076377584 | P.02 |
|---|--|--|---------------------------------------|
| | LARAMIE COUNTY 310 W 1911I | ESS APPLICATION PLANNING DEPARTMENT STREET SUITE 400 (307) 633-4303 FAX (307)633-4519 | |
| () .: roperty lines (lot | size) () Surrounding roads () W | PLAN OF STRUCTURE AND SITE INCLUDI Well and Septic location () Location of structur neway location () Other existing structures () | a an proparty |
| | [X] Zoning Certificate | [] Rural Address (Outside Z | |
| Application Date <u>4-2</u> | 30-02 | Certificate No. <u>812</u> | 8 |
| - | | Telephone | |
| Mailing Address 30 | 16 S Colecter | HWY Chatenne Raco | 7 |
| Owner (if different from | | | · · |
| | | Build [] Residential [] Accessory [] Co | mmc cial []* |
| Structure Type | MANFACTURED Home | Structure SizeSq. Ft. See Site plan requirem | tents for commercial |
| Will this structure have | water and sewer services? KIYe | es [] No | |
| | | Estimated Cost of Structure \$ 6000 | |
| Estimated Completion D Legal Description | Date $3 - 1 - 0 - 2$ Location of S | tructure Staked: [] Yes [] No-Call When Loca Sout | • • • • • • • • • • • • • • • • • • • |
| | Lot 29 Block/Tract | Subdivision SUNVILGE EST | they are |
| | | on Township Range | |
| | Ro | | |
| | Signature of Applicant | Data | |
| Applicant certi | Signature of Applicant fies that the above information is t | Date rue and correct to the best of his/her knowledge | 4. |
| **** | - ********** | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | *** |
| Zoning District MR - | ∠ Map Page # <u>01\9 </u> | loodplain Development Permit | 1ap 655 |
| Notes/Conditions | | -0 | |
| | | | |
| Site Address | 4 8 Allison | RQ N | ew? <u>/ CS</u> |
| | | ure and/or at driveway. Numbers shall be intact U S Post Office for mailb <u>ox loc</u> ation | |
| Status annul | BOARD OF COUNTY COM | MISSIONERS by attan Walkering | on |
| This certificate is issued su | bject to full compliance with the terms | s of the application and the zoning regulations and/or a ce of a well or a small wastewater permit. | addressing. |
| ssue Date <u>5102</u> | Expiration date 11-1-02 | ertificate must be renewed if construction is not star | ted by this date. |
| Receipt No. 91734 | 8 Amount \$ 50 - | GIS Entry JF 5-3-0 Z Final Inspection | 5-28-02 |
| Y | CARA END | | 27- |