

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:
BUILDING OWNER'S NAME Freddie Smith		Policy Number
BUILDING STREET ADDRESS (Including Apt, Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 612 E. Allison Road		Company NAIC Number
CITY Cheyenne	STATE Wyoming	ZIP CODE 82007
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 27 Block 1 Sunridge South 2nd filing		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-###" or ##.#####°)	HORIZONTAL DATUM: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input checked="" type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:
N 41° 06' 35" W 104° 47' 27"		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER LARAMIE COUNTY, WYOMING 560029	B2. COUNTY NAME Laramie	B3. STATE Wyoming
B4. MAP AND PANEL NUMBER 560029 0655E	B5. SUFFIX E	B6. FIRM INDEX DATE 1994
B7. FIRM PANEL EFFECTIVE/REVISED DATE 1994	B8. FLOOD ZONE(S) A	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 5296.4

B 10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe): _____

B 11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe): _____

B 12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
 Designation Date: **CP/A**

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

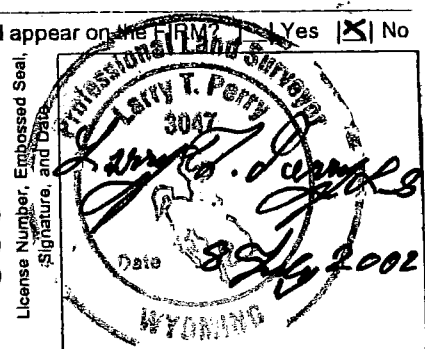
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number **8** (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 **29** Conversion/Comments **None**

Elevation reference mark used **Allison** Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	5999	8	ft.(m)
<input type="checkbox"/> b) Top of next higher floor	6001	4	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.)	6001	4	ft.(m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	5996	6	ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	5999	9	ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	6		
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h	571		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
LARRY T. PERRY L.S.

LICENSE NUMBER
LS 3047

TITLE
OWNER (LAND SURVEYOR)

COMPANY NAME
TERRESTRIAL SURVEYING & MAPPING Co.

ADDRESS
1127 TERRY RANCH ROAD

CITY
CHEYENNE

STATE
WYOMING

ZIP CODE
82007

SIGNATURE
[Signature]

DATE
8 JULY 2002

TELEPHONE
307 634 9360

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 AND BOX NO. 612 E. Allison Road		Policy Number
CITY Cheyenne	STATE Wyoming	ZIP CODE 82001
		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

The 100 year Flood Plane Elev. was determined from the "Allison Draw Master Drainage Plan" prepared in Nov 1988 on page 2-8, table 2-4, the elevation given at Sta. 166+00

Check here if attachments

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

For Zone AO and Zone A (without BFE), complete Items E1. through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA 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 0 ft.(m) 6 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 1 ft.(m) 5 in.(cm) above the highest adjacent grade. Complete Items C3.h and C3.i on front of form.
- E4. 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

ADDRESS CITY STATE ZIP CODE

SIGNATURE DATE TELEPHONE

COMMENTS

Check here if attachments

SECTION G - COMMUNITY INFORMATION (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.

- 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: _____ ft.(m) Datum: _____

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

LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

COMMENTS

Check here if attachments

Lot 27 Block 1

Sunridge South 2nd filing

612 E. Allison Road

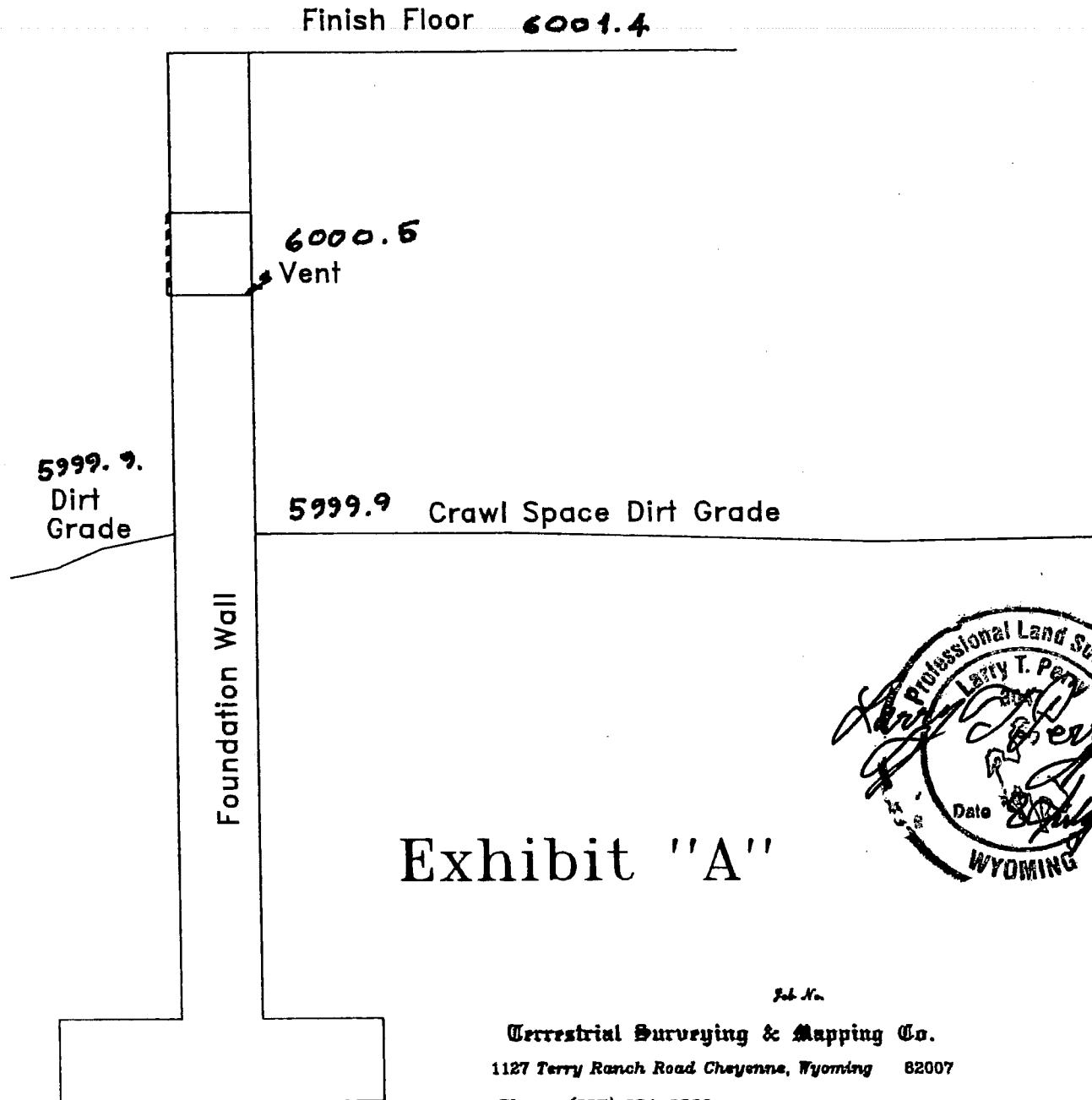


Exhibit "A"



Sub No.

Cerrestrial Surveying & Mapping Co.
1127 Terry Ranch Road Cheyenne, Wyoming 82007
Phone: (307) 634-9360



ZONING/ADDRESS APPLICATION



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

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 4/13/02 Certificate No. 8127
Applicant DAY Mobile Homes Telephone 637-5531
Mailing Address 3016 S Grandway Hwy Cheyenne WY 82007

Owner (if different from Applicant) _____
Application to: Place HUD UBC OTHER _____ Build Residential Accessory Commercial
Structure Type Manufactured Home Structure Size 2036 Sq. Ft. *See Site plan requirements for commercial
Will this structure have water and sewer services? Yes No
Lot Size 9.360 Sq. Ft. Estimated Cost of Structure \$ \$70,000.00
Estimated Completion Date 8-1-02 Location of Structure Staked: Yes No-Call When Location Is Staked
Legal Description _____
Lot Split _____ Lot 27 Block/Tract 1 Subdivision Sunridge Estates
Division _____ Section _____ Township _____ Range _____

PRJL 4/13/02
Signature of Applicant Date

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

Zoning District MR-2 Map Page # D119A Floodplain Development Permit yes Firm Map 655
Notes/Conditions See addendum

Site Address 612 E Allison RD New? yes

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 approval BOARD OF COUNTY COMMISSIONERS by Cathy Nealhan

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 5-1-02 Expiration date 11-1-02 Certificate must be renewed if construction is not started by this date.

Receipt No. 917348 Amount \$ 55 GIS Entry SP 5-3-02 Final Inspection 5-28-02

