

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>Barbara A. Gregory and Albert D. Gregory</u>		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>834 Gopp Court</u>		Policy Number
City <u>Cheyenne</u> State <u>WY</u> ZIP Code <u>82007</u>		Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>Portion of Tract 19, Richardson Tracts</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. _____ Long. _____		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>8</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>838</u> sq ft	a) Square footage of attached garage <u>N/A</u> sq ft	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>	b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>	
c) Total net area of flood openings in A8.b <u>0</u> sq in	c) Total net area of flood openings in A9.b <u>None</u> sq in	
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>Laramie County 560029</u>		B2. County Name <u>Laramie County</u>		B3. State <u>Wyoming</u>	
B4. Map/Panel Number <u>1356</u>	B5. Suffix <u>F</u>	B6. FIRM Index Date <u>5-1-80</u>	B7. FIRM Panel Effective/Revised Date <u>1-17-07</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>5997.7</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

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. 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 C2.a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.
Benchmark Utilized City Cntl Mon. "Allison" Vertical Datum NAVD 88
Conversion/Comments _____

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>5794.7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor <u>Main Floor 5798.0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) <u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab) <u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG) <u>5794.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG) <u>5794.5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

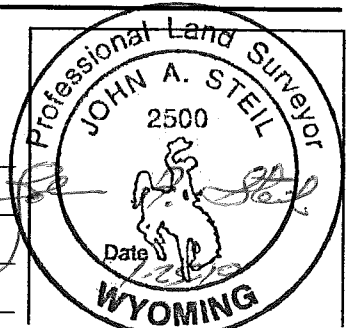
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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.

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Certifier's Name John A. Steil License Number WY PLS 2500
Title Professional Land Surveyor Company Name Steil Surveying Services, LLC
Address PO Box 2073 City Cheyenne State WY ZIP Code 82003

Signature [Handwritten Signature] Date 1/25/10 Telephone 307-634-7273



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. 834 Gopp Court	Policy Number
City Cheyenne State WY ZIP Code 82007	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

Signature John A. Steil Date 1/26/2010 Check here if attachments

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 _____ feet meters above or below the HAG.
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the HAG.
- E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation G2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.
- E5. 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, 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, 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. Check the measurement used in Items G8 and G9.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by 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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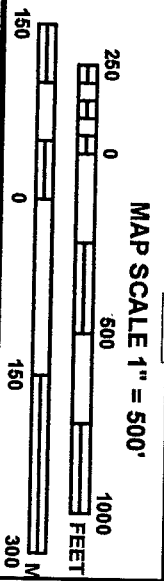
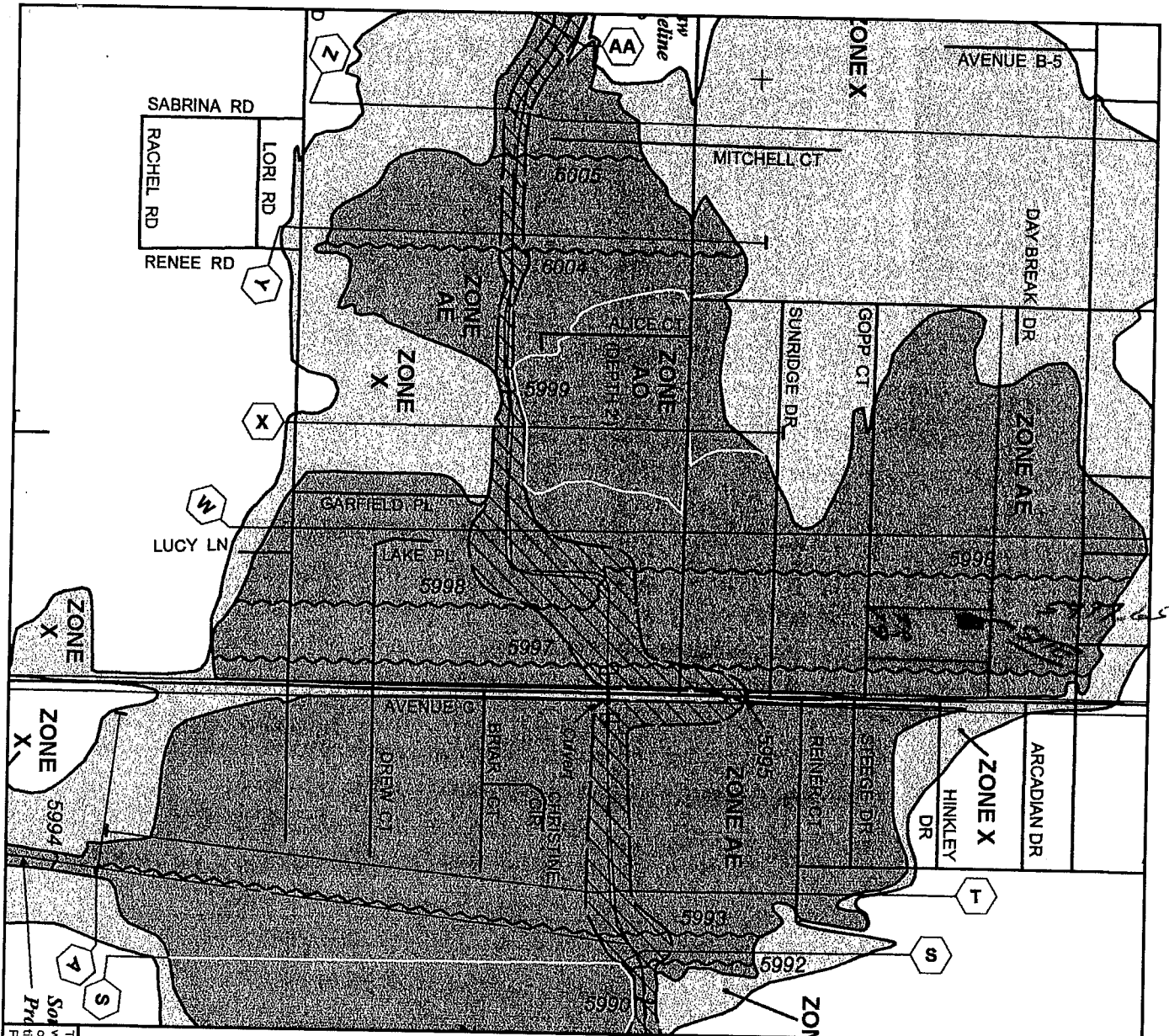
- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____
- G10. Community's design flood elevation _____ feet meters (PR) Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments



PANEL 1356F

FIRM
FLOOD INSURANCE RATE MAP
LARAMIE COUNTY,
WYOMING
AND INCORPORATED AREAS
PANEL 1356 OF 1650
 (SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS

COMMUNITY	NUMBER	PANEL	SUFFIX
CHEYENNE, CITY OF	59000	1356	F
LARAMIE COUNTY	59029	1356	F

Notice to User: The Map Number shown below should be used when plotting firm coverage. The Community Number shown above should be used on insurance applications for the subject community.

MAP NUMBER
56021C1356F
EFFECTIVE DATE
JANUARY 17, 2007



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at www.nfsc.fema.gov



Manufactured Home Set Up Application

Laramie County Planning and Development Office
310 W 19th St Room 400
Cheyenne, WY 82001

Fax: 307-633-4519
Phone: 307-633-4303
Inspection: 307-633-4615
Website: laramiecounty.com
planning@laramiecounty.com

Incomplete Applications Can Not Be Accepted

Bldg Plmbg Mech Elctr Gas

BP-09-01142

For Office Use Only	Received By: <u>RC</u>	Date: <u>8-4-09</u>	Permit #
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Valuation of Work: <u>800⁰⁰</u>	Job Address: <u>834 Gopp Ct.</u>
Legal Description: Subdivision <u>Richardson Jk</u>	Lot: <u>719</u> Block/Tract: <u>19</u> # Acres: # Sq Ft:
Division: <u>Appt</u>	Section: Township: Range:

Owner Name: <u>Doreen Morgan</u>	Phone:
Address: <u>4740 Pineridge Ave</u>	City: <u>Cheyenne</u> State: <u>WY</u> Zip Code: <u>82009</u>

Contractor Name: <u>Brian Home's const.</u>	Phone:
Address: <u>3505 Burlington Ave</u>	City: <u>EVAN</u> State: <u>CO</u> Zip Code: <u>80620</u>

Purpose of Permit New Addition Renovation Demolish Move

Description of Work *Complete description of the work done including any plumbing, mechanical (Heating, ventilation or air conditioning), electrical, fire sprinkler or alarm. (Work is not included in the permit unless described in this scope of work)*

setting home up to the code

no decks 1970 medallion

Structure Use single family Manufactured Bldg 20 Yrs Old Structurally Altered

Foundation Type Slab-on-grade Crawl space Block/Piers Basement

By my signature and under penalty of perjury, I hereby certify that I am the owner of the reference property, or the owner's authorized agent. I have read and examined this application and know the same to be true and correct. All provisions or laws and ordinances governing this type of work will be complied with, whether specified herein or not.

The issuance of a permit does not presume to give authority to violate or cancel the provisions of any state or local law regulating construction, or guarantee issuance of a well or septic permit, this permit becomes null and void if work or construction authorized is not commenced within 180 days, unless prior authorization has been issued by this office. Failure to obtain inspection every 180 days will cause permit to expire.

I understand that occupying this structure prior to obtaining a Certificate of Occupancy/Completion is against the law. Failure to comply may result in a \$750 fine with each day of occupancy being a separate offence.

Signature of Owner/Agent: [Signature]

Printed Name: Brian Saward Date: 8/4/09

For Office Use Only <input checked="" type="checkbox"/>	Type of Construction:	Occupancy Group:	Elev. Cert. or Floodplain Dev. <input checked="" type="checkbox"/>	New Address <input type="checkbox"/>
Flood Hazard Area <input type="checkbox"/>	Flood Zone: <u>AE</u>	Panel Number: <u>135617</u>	Zoning District: <u>MR-2</u>	Map Page: <u>D-119 A</u>

Conditions:

Will need an ^{Elevation} certificate prior to issuance of CO.

	Approved By	Review Date	Building Fee	
Floodplain Review:	<u>[Signature]</u>	<u>8-6-09</u>	Plan Review Fee	<u>25.00</u>
Zoning Review:	<u>[Signature]</u>	<u>8-6-09</u>	Master Plan Fee	
Address Review/Assignment:	<u>CT</u>	<u>8-6-09</u>	Zoning Certificate	
Plan Review:			Other Fee	
Board of Commissioners-approved for issuance:	<u>[Signature]</u>	<u>8/7/09</u>	Total Fees	<u>25.00</u>
Certificate of Occupancy			Fees Paid: CK# <u>1943</u> <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Receipt #: <u>322</u>	

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