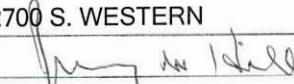
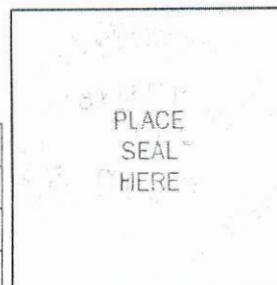


ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008
Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION			FOR INSURANCE COMPANY USE	
A1. Building Owner's Name BRIAN HESTER			Policy Number: _____	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1213 NORTH RAMSEY			Company NAIC Number: _____	
City STILLWATER		State OK	ZIP Code 74074	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 10, BK.2, PAYNE'S SUBDIVISION OF LOT 6, BURR'S ADDITION				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL				
A5. Latitude/Longitude: Lat. N 36 08 05		Long. W 97 04 01	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 8				
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) 1925 sq ft b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 14 c) Total net area of flood openings in A8.b 2016 sq in d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
A9. For a building with an attached garage: a) Square footage of attached garage NONE sq ft b) 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 _____ sq in 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		B2. County Name PAYNE		B3. State OK
B4. Map/Panel Number 40119C0064	B5. Suffix F	B6. FIRM Index Date MAY 16, 2007	B7. FIRM Panel Effective/ Revised Date N/A	B8. Flood Zone(s) AE
B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 893.7				
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input checked="" type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____				
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/Source: _____				
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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. In Puerto Rico only, enter meters. Benchmark Utilized: SW17 Vertical Datum: VERTCON TO NAVD 88				
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____				
Datum used for building elevations must be the same as that used for the BFE. Check the measurement used.				
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 893.5 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters b) Top of the next higher floor 896.3 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters c) Bottom of the lowest horizontal structural member (V Zones only) N/A <input type="checkbox"/> feet <input type="checkbox"/> meters d) Attached garage (top of slab) NONE <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 895.4 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters f) Lowest adjacent (finished) grade next to building (LAG) 893.5 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters g) Highest adjacent (finished) grade next to building (HAG) 893.9 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N/A <input type="checkbox"/> feet <input type="checkbox"/> 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.				
<input checked="" type="checkbox"/> Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Check here if attachments.				
Certifier's Name JIMMY W. HILL		License Number PE 6156		
Title PROFESSIONAL ENGINEER		Company Name PRIVATE PRACTICE ENGR.		
Address 2700 S. WESTERN		City STILLWATER	State OK	ZIP Code 74074
Signature 		Date JULY 5, 2016	Telephone 405-743-4455	



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