

## ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9

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

### SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name **DAVID McCASLIN**

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No.

**1401 S. RANSOM STREET**

City **STILLWATER**

A3. Property Description (Lot and Block Numbers)  
**MISC TRACT IN N1/2 SE1/4**

A4. Building Use (e.g., Residential, Non-Residential)

A5. Latitude/Longitude: Lat. **N 36.00175**

A6. Attach at least 2 photographs of the building

A7. Building Diagram Number **1**

A8. For a building with a crawlspace or enclosure

a) Square footage of crawlspace or enclosure

b) No. of permanent flood openings in the enclosure(s) within 1.0 foot above adjacent grade

c) Total net area of flood openings in A8.b

d) Engineered flood openings? ☐ Yes ☒ No

### FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number:

ZIP Code **74074**

*included in  
2015 5 yr  
Audit*

Horizontal Datum ☐ NAD 1927 ☒ NAD 1983

building with an attached garage.

square footage of attached garage **NONE** sq ft

number of permanent flood openings in the attached garage

within 1.0 foot above adjacent grade **N/A**

total net area of flood openings in A9.b **N/A** sq in

d) Engineered flood openings? ☐ Yes ☒ No

### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
**CITY OF STILLWATER 405380**

B2. County Name **PAYNE**

B3. State **OK**

B4. Map/Panel Number  
**40119C0231**

B5. Suffix  
**F**

B6. FIRM Index Date  
**MAY 16, 2007**

B7. FIRM Panel Effective/  
Revised Date  
**MAY 16, 2007**

B8. Flood Zone(s)  
**AE**

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
**859.9**

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:

☒ XS Profile ☐ FIRM ☐ Community Determined ☐ Other/Source: **N/A**

B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☒ NAVD 1983 ☐ Other/Source: **N/A**

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No

Designation Date: **N/A** / **N/A** / **N/A** ☐ CBRS ☐ 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. In Puerto Rico only, enter meters.

Benchmark Utilized: **RM 36 (VERTCON TO NAVD 88)** Vertical Datum: **NAVD 88**

Indicate elevation datum used for the elevations in items a) through h) below: ☐ NGVD 1929 ☒ NAVD 1983 ☐ 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) **861.4** ☒ feet ☐ meters

b) Top of the next higher floor **N/A** ☒ feet ☐ meters

c) Bottom of the lowest horizontal structural member (V Zones only) **N/A** ☒ feet ☐ meters

d) Attached garage (top of slab) **N/A** ☒ feet ☐ meters

e) Lowest elevation of machinery or equipment servicing the building **861.4** ☒ feet ☐ meters

(Describe type of equipment and location in Comments)

f) Lowest adjacent (finished) grade next to building (LAG) **861.1** ☒ feet ☐ meters

g) Highest adjacent (finished) grade next to building (HAG) **861.1** ☒ feet ☐ meters

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support **N/A** ☒ feet ☐ meters

### SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

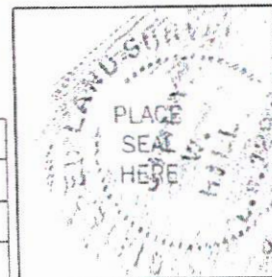
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

☐ Check here if comments are provided on back of form.

☐ Check here if attachments.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

Certifier's Name <b>JIMMY W. HILL</b>	License Number <b>LS 129</b>
Title <b>PRIVATE ENGR-SURVEYOR</b>	Company Name
Address <b>2700 S. WESTERN</b>	City <b>STILLWATER</b> State <b>OK</b> ZIP <b>74074</b>
Signature <i>Jimmy W. Hill</i>	Date <b>2/23/15</b> Telephone <b>405 743 4455</b>





## ELEVATION CERTIFICATE, page 2

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. <b>1401 S. RANSOM STREET</b>		Policy Number:
City <b>STILLWATER</b>	State <b>OK</b>	Company NAIC Number:
ZIP Code <b>74074</b>		

## 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

A/C COMPRESSOR

Signature

Date

2/23/15

## 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 LAG.
- 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 C2.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 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-G10. In Puerto Rico only, enter meters.

- 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
G7. This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building:	_____ <input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____
G9. BFE or (in Zone AO) depth of flooding at the building site:	_____ <input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____
G10. Community's design flood elevation:	_____ <input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____
Local Official's Name	Title	
Community Name	Telephone	
Signature	Date	
Comments		

☐ Check here if attachments.



## ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

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

### SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <b>DAVID McCASLIN</b>		FOR INSURANCE COMPANY USE	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1401 S. RANSOM STREET</b>		Policy Number:	
City <b>STILLWATER</b>	State <b>OK</b>	Company NAIC Number:	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>MISC TRACT IN N1/2 SE1/4 SEC. 24, T19N, R2E</b>			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)		Horizontal Datum <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983	
A5. Latitude/Longitude: Lat. <b>N 36.00175</b> Long <b>W 97.0230</b>			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.			
A7. Building Diagram Number <b>1</b>			
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) _____ sq ft		a) Square footage of attached garage <b>NONE</b> sq ft	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		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 A8.b _____ sq in		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		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>CITY OF STILLWATER 405380</b>		B2. County Name <b>PAYNE</b>		B3. State <b>OK</b>	
B4. Map/Panel Number <b>40119C0231</b>	B5. Suffix <b>F</b>	B6. FIRM Index Date <b>MAY 16, 2007</b>	B7. FIRM Panel Effective/ Revised Date <b>MAY 16, 2007</b>	B8. Flood Zone(s) <b>AE</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>859.9</b>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input checked="" type="checkbox"/> 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 1983 <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: ☐ 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. In Puerto Rico only, enter meters.  
Benchmark Utilized: **RM 36 (VERTCON TO NAVD 88)** Vertical Datum: **NAVD 88**  
Indicate elevation datum used for the elevations in items a) through h) below: ☐ NGVD 1929 ☒ NAVD 1983 ☐ Other/Source: \_\_\_\_\_  
Datum used for building elevations must be the same as that used for the BFE.

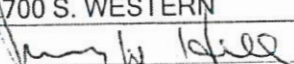
Check the measurement used:

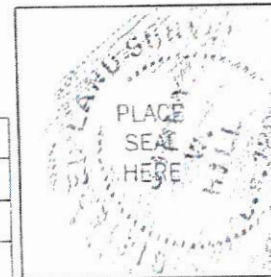
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>861.4</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<b>N/A</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<b>N/A</b>	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	_____	<input 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)	_____	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>861.1</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>861.1</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<b>N/A</b>	<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.

☐ 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  
☐ Check here if attachments.

Certifier's Name <b>JIMMY W. HILL</b>		License Number <b>LS 129</b>	
Title <b>PRIVATE ENGR-SURVEYOR</b>	Company Name		
Address <b>2700 S. WESTERN</b>	City <b>STILLWATER</b>	State <b>OK</b>	ZIP <b>74074</b>
Signature: 	Date <b>2/23/15</b>	Telephone <b>405 743 4455</b>	



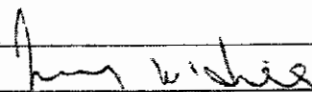
**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. <b>1401 S. RANSOM STREET</b>		Policy Number	
City <b>STILLWATER</b>	State <b>OK</b>	ZIP Code <b>74074</b>	
		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 	Date <b>2/23/15</b>
--	------------------------

**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 LAG.

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 C2.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 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-G10. In Puerto Rico only, enter meters.

- 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	
G7. This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement			
G8. Elevation of as-built lowest floor (including basement) of the building: _____		<input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____
G9. BFE or (in Zone AO) depth of flooding at the building site: _____		<input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____
G10. Community's design flood elevation: _____		<input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____
Local Official's Name		Title	
Community Name		Telephone	
Signature		Date	
Comments			

☐ Check here if attachments