

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME Tony and Sarah Gray		For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1051 Triumph Drive Sub		Policy Number:
CITY Hailey	STATE ID	Company NAIC Number:
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 4 in Block 7 Dellaview Subdivision, Hailey ID 83333		ZIP CODE 83333
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential		
LATITUDE/LONGITUDE (OPTIONAL) (##° -##' -###" or #####")	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. FIRM COMMUNITY NAME & COMMUNITY NUMBER Hailey		B2. COUNTY NAME Blaine		B3. STATE Idaho	
B4. MAP AND PANEL NUMBER 160022-0664	B5. SUFFIX D	B6. FIRM INDEX DATE 03-17-1997	B7. FIRM PANEL EFFECTIVE/REVISED DATE 03-17-1997	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 5281.9

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe):
 B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):
 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date

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 4 (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

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

a) Top of bottom floor (including basement or enclosure) 5281.5 ft.(m)
 b) Top of next higher floor 5284.1 ft.(m)
 c) Bottom of lowest horizontal structural member (V zones only) ___ ft.(m)
 d) Attached garage (top of slab) 5281.9 ft.(m)
 e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 5284.1 ft.(m)
 f) Lowest adjacent (finished) grade (LAG) 5281.5 ft.(m)
 g) Highest adjacent (finished) grade (HAG) 5281.5 ft.(m)
 h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 8
 i) Total area of all permanent openings (flood vents) in C3.h 1568 sq. in. (sq. cm)

LICENSED ARCHITECT
Ar-2681

License Number, Embossed Seal, Signature, and Date

Jay W. Cone
7/16/03
JAY W. CONE
STATE OF IDAHO

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 Jay W. Cone LICENSE NUMBER AR 2681

TITLE ARCHITECT	COMPANY NAME		
ADDRESS 551 EL DORADO LANE	CITY HAILEY	STATE ID	ZIP CODE 83333
SIGNATURE <i>Jay W. Cone</i>	DATE 7 16 03	TELEPHONE 208 578 5226	

NOTE: In these spaces, copy the corresponding information from Section A.

STREET ADDRESS (including Apt, Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

1051 Triumph Drive Sub

STATE ID

ZIP CODE 83333

For Insurance Company Use:

Policy Number

Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

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 ___ ft.(m) ___ 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 ___ ft.(m) ___ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.

E4. The top of the platform of machinery and/or equipment servicing the building is ___ ft.(m) ___ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).

E5. 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? No Unknown. The local official must certify this information in Section G. Yes

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

Tony and Sarah Gray

ADDRESS

PO Box 6622

CITY Ketchum

STATE ID

ZIP CODE 83340

SIGNATURE

S. Willow Gray

DATE

7-23-03

TELEPHONE

208-788-3353

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

G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

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

___ ft.(m)

Datum:

___ ft.(m)

Datum:

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

COMMENTS

Check here if attachments

CITY OF HAILEY

POST CONSTRUCTION ELEVATION CERTIFICATE

Date: 4/12/04

Second Survey

Community No. 160022

IMPORTANT

This form must be completed by a registered professional engineer or surveyor, then returned to the City of Hailey Building Department prior to obtaining a framing inspection.

Property Owner: NA

Address: NA

Property Description:

Subdivision: Della Vue Subd Lot 4, Block 7, Plat _____

FIA Map Panel on which property is located: Panel 160022 0664D March 17, 1997

FIA Map Zone in which property is located: AE

Base Flood Elevation at the proposed site: 5281'

Required minimum elevation of lowest floor: 5284' per COH FP Permit (see attached sketch)

ELEVATION CERTIFICATE

I certify that the building at the property location described above has the lowest floor at an elevation of 5284' feet, NGBD (mean sea level). *(see attached diagram for FF elevation)*

Date: 4/12/04

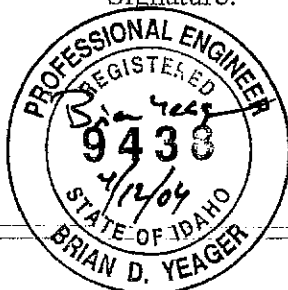
Certifier's Name: Brian Yeager

Title: Engineer

Address: P.O. Box 425 Ketchum

Signature: Brian Yeager

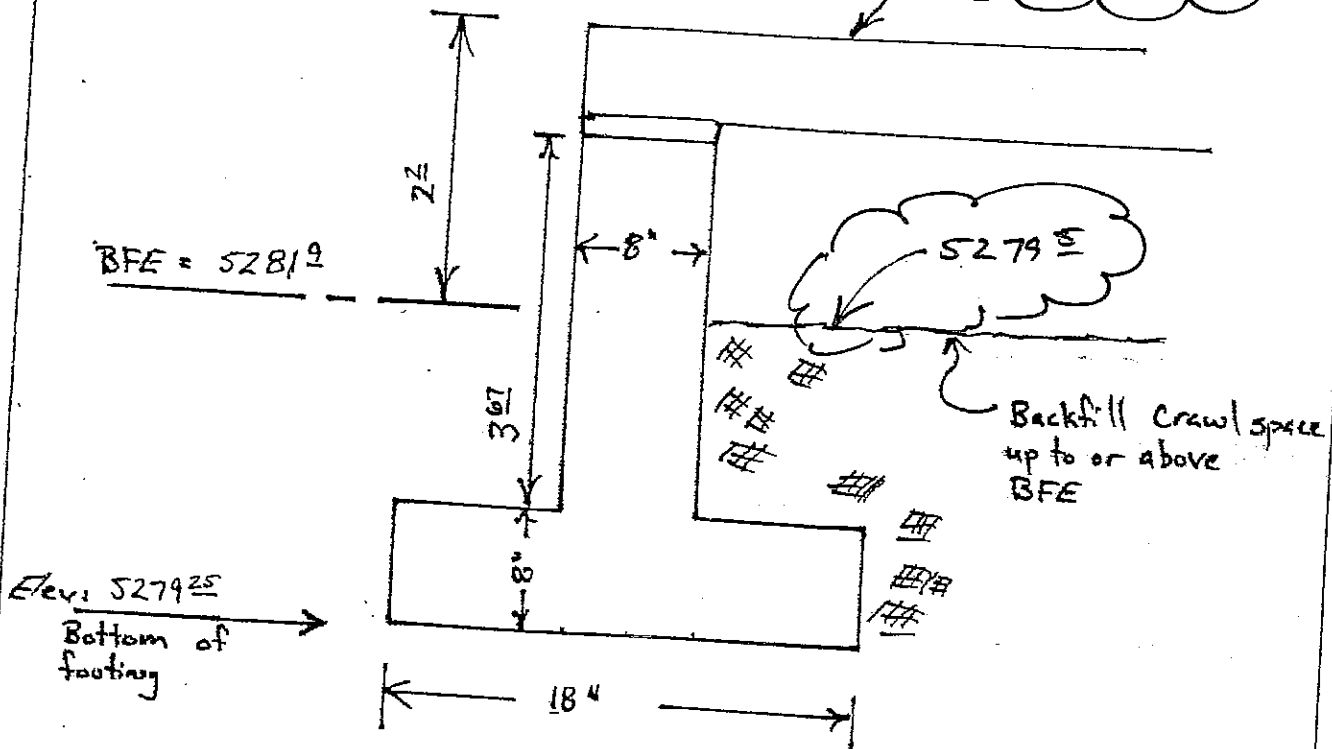
Affix Seal or Stamp



22-141 50 SHEETS
22-142 100 SHEETS
22-143 200 SHEETS



Asbuilt 4/12/04
8423
Top FF = 5284.1



Foundation Detail (Not to scale)
Note: Dimensions shown are as provided *
by client
(elevations shown are in decimal feet)

Post-it® Fax Note	7671	Date	4/15	# of pages	▶ 5
To	Belinda	From	Tara		
Co./Dept.	AMICA	Co.	City of Hailey		
Phone #		Phone #			
Fax #	503-670-7476	Fax #			

elevation certificates
for 1051 Triumph
Hailey, ID

1-800-882-6422
x 344

Completed Const.
Elev.
C-1

fax 503-670-7476