

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 <u>CPM PROPERTIES</u> | | Policy Number |
| BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>311 CEDAR STREET</u> | | Company NAIC Number |
| CITY <u>HAILEY</u> | STATE <u>Idaho</u> | ZIP CODE <u>83333</u> |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>LOT 3 BLOCK 1 CEDAR BEND SUBDIVISION</u> | | |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) <u>RESIDENTIAL</u> | | |
| LATITUDE/LONGITUDE (OPTIONAL) (##° -##' -###" or ###.####") | HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input checked="" 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. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>HAILEY, IDAHO 160022-664D</u> | | B2. COUNTY NAME <u>BLAINE</u> | | B3. STATE <u>Idaho</u> | |
| B4. MAP AND PANEL NUMBER <u>160022</u> | B5. SUFFIX <u>0664D</u> | B6. FIRM INDEX DATE <u>03-17-97</u> | B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>03-17-97</u> | B8. FLOOD ZONE(S) <u>AE</u> | B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>5288.0</u> |

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)

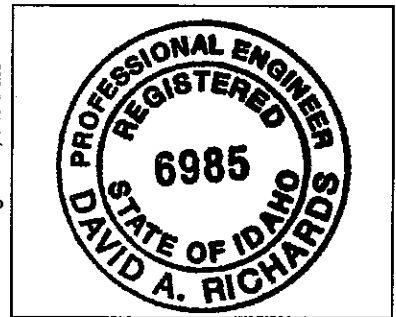
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 2 (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 C3a-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 5292.84 Conversion/Comments FEMA REFERENCE MONUMENT
Elevation reference mark used RM 7-664 Does the elevation reference mark used appear on the FIRM? Yes No

| | |
|---|--------------------------------|
| <input type="checkbox"/> a) Top of bottom floor (including basement or enclosure) | <u>5288</u> . <u>0</u> ft.(m) |
| <input type="checkbox"/> b) Top of next higher floor | <u>5291</u> . <u>0</u> ft.(m) |
| <input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only) | <u>—</u> . <u>—</u> ft.(m) |
| <input type="checkbox"/> d) Attached garage (top of slab) | <u>5290</u> . <u>5</u> ft.(m) |
| <input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building | <u>5291</u> . <u>00</u> ft.(m) |
| <input type="checkbox"/> f) Lowest adjacent grade (LAG) | <u>5289</u> . <u>75</u> ft.(m) |
| <input type="checkbox"/> g) Highest adjacent grade (HAG) | <u>5289</u> . <u>75</u> ft.(m) |
| <input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade | <u>0</u> |
| <input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h | <u>0</u> sq. in. (sq. cm) |

License Number, Embossed Seal, Signature, and Date



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 DAVID A RICHARDS LICENSE NUMBER ID # 6985

TITLE PROFESSIONAL ENGINEER COMPANY NAME GALWA ENGINEERING, INC

ADDRESS PO Box 425 CITY KETCHUM STATE ID ZIP CODE 83340

SIGNATURE [Signature] DATE 04-09-02 TELEPHONE (208) 788-1705

| | | |
|---|----------------|----------------------------|
| 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. 311 CEDAR STREET | | Policy Number |
| CITY HALLEY | STATE IDAHO | ZIP CODE 83333 |
| 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

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.
- 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.
- 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, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here.

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 |
|-------------------|------------------------|---|

- 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

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

| | | | |
|--|-------------|---|--|
| SECTION A - PROPERTY OWNER INFORMATION | | | For Insurance Company Use: |
| BUILDING OWNER'S NAME CPM Properties | | | Policy Number |
| BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 311 Cedar Street | | | Company NAIC Number |
| CITY Hailey | STATE ID | ZIP CODE 83333 | |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 3 Block 1 Cedar Bend Subdivision | | | |
| 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 checked="" 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. NFIP COMMUNITY NAME & COMMUNITY NUMBER Hailey, Idaho 160022-6640 | | B2. COUNTY NAME Blaine | | B3. STATE Idaho | |
| B4. MAP AND PANEL NUMBER 160022-0664 | B5. SUFFIX D | B6. FIRM INDEX DATE 03-17-97 | B7. FIRM PANEL EFFECTIVE/REVISED DATE 03-17-97 | B8. FLOOD ZONE(S) AE | B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 5288.0 |

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)

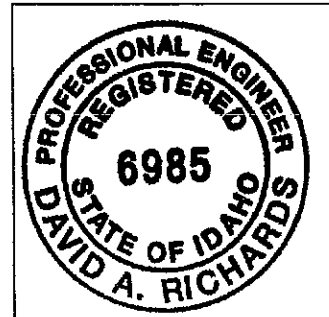
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 2 (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 5292.84 Conversion/Comments FEMA Reference Monument
 Elevation reference mark used 7-664 Does the elevation reference mark used appear on the FIRM? Yes No

| | |
|--|-----------------|
| a) Top of bottom floor (including basement or enclosure) | 5288. 28 ft.(m) |
| b) Top of next higher floor | 5291. 83 ft.(m) |
| c) Bottom of lowest horizontal structural member (V zones only) | _____ ft.(m) |
| d) Attached garage (top of slab) | 5290. 28 ft.(m) |
| e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) | 5291. 83 ft.(m) |
| f) Lowest adjacent (finished) grade (LAG) | 5290. 28 ft.(m) |
| g) Highest adjacent (finished) grade (HAG) | 5290. 37 ft.(m) |
| h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 7 | |
| i) Total area of all permanent openings (flood vents) in C3.h 616.69 sq. in. (sq. cm) | |

License Number, Embossed Seal, Signature, and Date



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 David A Richards | LICENSE NUMBER ID#6985 | | |
| TITLE Professional Engineer | COMPANY NAME Galena Engineering, Inc. | | |
| ADDRESS PO Box 425 | CITY Ketchum | STATE ID | ZIP CODE 83340-0425 |
| SIGNATURE <i>David A Richards</i> | DATE 10/30/02 | TELEPHONE 208-788-1705 | |

CITY OF HAILEY
APPLICATION FOR
FLOODPLAIN DEVELOPMENT PERMIT

Applicant's Name CPM PROPERTIES Mailing Address PO BOX 6213
SUN VALLEY
Project Name LOT 3, BLOCK 1, CEDAR BEND SUB
Telephone # 622-8945 Cell # 471-3845 Fax # 622 8964

Legal Description of Subdivision Development _____ Lot 3, Block 1, Plat # _____
Physical Location of Subdivision Development CEDAR BEND SUBDIVISION

Description of Development

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Residential Construction | <input type="checkbox"/> Non-Residential | <input checked="" type="checkbox"/> New Construction |
| <input checked="" type="checkbox"/> On Single Lot | <input checked="" type="checkbox"/> Subdivision | <input type="checkbox"/> Excavation |
| <input type="checkbox"/> Addition or Improvements | <input checked="" type="checkbox"/> Fill | <input type="checkbox"/> Grading |
| <input type="checkbox"/> Watercourse Alteration | <input type="checkbox"/> Other _____ | |

By National Flood Insurance Program (NFIP) rating rules, a sub-grade crawl space is rated as a basement and it will be reflected in your insurance premiums..

REQUIRED ATTACHMENTS TO THIS APPLICATION:

- Mean Sea Level (MSL) elevation of the lowest floor (including basement) of all structures
- MSL elevation to which any structure is floodproofed
- Certification by a registered professional engineer that the floodproofing methods meet the community floodproofing criteria
- A description of the extent to which any watercourse will be altered or relocated LOT IS NOT WITHIN A WATER COURSE
- Base flood or 100 year flood elevation date for a development or subdivision
BASE FLOOD ELEVATION = 5288.0 NGVD29

Attach the following information, if applicable

- Plans in duplicate, drawn to scale showing the nature, dimensions, and elevations of the area in question
- Existing or proposed structures, fill, storage of materials, drainage facilities
- Location of items 6 and 7.

The proposed development is located in the Floodway 100-year Floodplain Floodfringe

The Base Flood Elevation or depth number at the development site is 5288 feet.

PLAN REVIEW

The following is to be completed by a registered professional engineer or land surveyor.

5291.0 feet - MSL elevation or depth number to which the structure is to be elevated. (FF ELEVATION)

5291.0 feet - MSL elevation or depth number to which the structure is to be floodproofed. (ABOVE BFE)

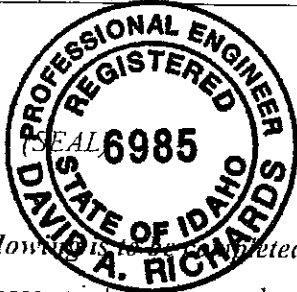
Date 4-9-02

Signature David A Richards

Print Name DAVID A RICHARDS

Title PROFESSIONAL ENGINEER

Address HAILEY IDAHO



The following is to be completed by a community permit official.

All necessary information and certificates are attached.

- Permit Denied. The proposed development is not in conformance with applicable Floodplain Management Standards.
- Permit Approved. I have reviewed the plans and materials submitted in support of the proposed development and find them in compliance with applicable Floodplain Management Standards.
- Referred to Board of Adjustment. The proposal is not in conformance with applicable Floodplain Management Standards (see attached explanation) and the application is referred to the Board of Adjustment for variance action.

Date _____

Signature Tracie Sny

CONSTRUCTION REVIEW

Attached are the following:

1. Completed FEMA elevation certificate based on finished construction. At foundation inspection, verify elevation of residence floor.
2. Certificates of a registered professional engineer or land surveyor documenting the following elevations:

The certified as-built MSL elevation of the lowest floor of the structure is _____ feet.

The certified as-built MSL floodproofed elevation of the structure is _____ feet.

Certificate of Occupancy or Compliance is Issued on this _____ day of _____, 20____

Signed _____

CITY OF HAILEY

FLOODPLAIN ELEVATION/FLOOD-PROOFING CERTIFICATION

This Certificate must be signed and sealed by a registered professional Engineer or Surveyor and filed with the Hailey Building Department at the time of building permit application.

1st Survey

I hereby certify that the bench mark set on property identified as T. 2 N., R. 18 E., B.M., Section 16, Hailey, Blaine County, Idaho, Subdivision CEDAR BEND SUBDIVISION Lot No. 3 Block No. 1 Tax Lot No. N/A Street Address 311 CEDAR STREET is at an elevation of 5290.59 feet NGVD 29 - NAVD 88.

Bench Mark description and location: TOP OF OPERATING NUT OF FIRE HYDRANT LOCATED ON SOUTH SIDE OF CEDAR STREET. ELEVATION IS TIED TO FEMA REFERENCE MARKER RM 7-664 BY SURVEYED LEVEL LOOP

SIGNATURE David A. Richards (SEAL)

NAME DAVID A. RICHARDS

TITLE PROFESSIONAL ENGINEER

ADDRESS GALENA ENG., HAILEY, IDAHO

DATE 2-15-02

