

CITY OF HAILEY

FLOODPLAIN DEVELOPMENT PERMIT

Name of Applicant MEG MONDAY & JEREMY SCHERER Date 8-3-00
Name of Project if applicable _____
Address 441 DELLA VISTA DRIVE Phone _____
Location of Proposed Development Subdivision BIRD WOOD Lot 10
Block 1 Plat _____

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 type="checkbox"/> Subdivision | <input type="checkbox"/> Excavation |
| <input type="checkbox"/> Addition or Improvements | <input type="checkbox"/> Fill | <input type="checkbox"/> Grading |
| <input type="checkbox"/> Watercourse Alteration | | |
| <input type="checkbox"/> Other _____ | | |

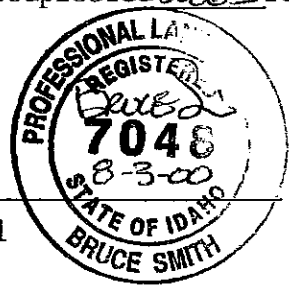
Attach to the application the following information where applicable. Plans in duplicate, drawn to scale showing the nature, dimensions, and elevations of the area in question; existing or proposed structures, fill, storage of materials, drainage facilities; and the location of the foregoing. Specifically, the following information is required: (1) Mean sea level (MSL) elevation of the lowest floor (including basement) of all structures; (2) MSL elevation to which any structure is floodproofed; (3) certification by a registered professional engineer that the floodproofing methods meet the community floodproofing criteria; (4) a description of the extent to which any watercourse will be altered or relocated, and (5) base (100-year) flood elevation data for a development or subdivision.

The proposed development is located in the Floodway Floodfringe
The Base Flood Elevation or depth number at the development site is: 5285.3

Source Documents FIRM PANEL 160022 0668 D, MARCH 17, 1997

Plan Review MINIMUM
MSL Elevation or depth number to which the structure is to be elevated 5287.1 ft.
MSL Elevation or depth number to which the structure is to be floodproofed 5286.3 ft.

SIGNATURE Bruce Smith (SEAL)
NAME BRUCE SMITH
TITLE PROFESSIONAL LAND SURVEYOR
ADDRESS P.O. Box 2037, KETCHUM, ID 83340



DATE _____
The following is to be completed by the community permit official
All necessary information and certificates are attached.

Action

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

Date AUG 7, 2000

Signature Bruce Smith

Building construction documentation

The certified as-built MSL elevation of the lowest floor of the structure is 5288 ft.
The certified as-built MSL floodproofed elevation of the structure is _____ ft.
Certificates of a registered professional engineer or land surveyor documenting these elevation are attached.

Certificate of Occupancy or Compliance Issued 9 NOV 00 Bruce Smith

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 BIRD WOOD
Lot No. 10 Block No. 1 Tax Lot No. _____
Street Address 441 DELLA VISTA DRIVE
is at an elevation of 5286.3 feet, NGVD 29 - NAVD 88..

Bench Mark description and location: SET SPIKE IN 8"
ASPEN APPROXIMATELY MID LOT AND 30 FT SOUTH
OF NORTH BOUNDARY, WITH STAKE MARKED "BENCHMARK
5286.3, BFE + 12 FT.

SIGNATURE Bruce S.

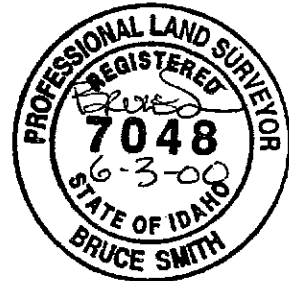
(SEAL)

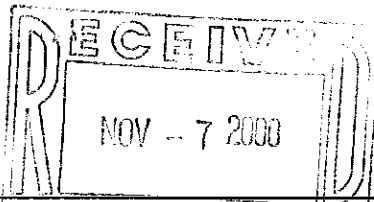
NAME BRUCE SMITH

TITLE PROFESSIONAL LAND SURVEYOR

ADDRESS P.O. BOX 2037, KETCHUM

DATE 6-03-00





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

BUILDING OWNER'S NAME Jeremy Scherer and Meg Monday		For Insurance Company Use: Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and or Bldg. No.) OR P.O. ROUTE AND BOX NO. 441 Della Vista Drive, Hailey, ID or P.O. Box 6355, Ketchum, ID 83340		Company NAIC Number	
CITY Hailey	STATE ID	ZIP CODE 83333	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 10, Block 1, Birdwood Subdivision			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) Residential			
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-##.##" or ##.°) N 43-31' W 114-19'	HORIZONTAL DATUM: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input checked="" type="checkbox"/> GPS (Type): <input checked="" type="checkbox"/> USGS Quad Map Other:	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER City of Hailey, Idaho; 160022		B2. COUNTY NAME Blaine		B3. STATE ID	
B4. MAP AND PANEL NUMBER 160022 0664	B5. SUFFIX D	B6. FIRM INDEX DATE March 17, 1997	B7. FIRM PANEL EFFECTIVE/REVISED DATE March 17, 1997	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 5285.3

B 1 0. 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.

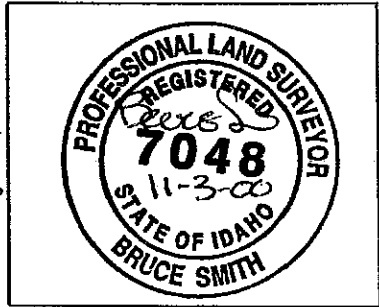
C2. Building Diagram Number 8 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

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 NGVD 1929 Conversion/Comments

Elevation reference mark used RM8-664 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>5288</u>	<u>0</u>	ft. (m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>5287</u>	<u>0</u>	ft. (m)
<input type="checkbox"/> d) Attached garage (top of slab)	<u>5286</u>	<u>0</u>	ft. (m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>5288</u>	<u>0</u>	ft. (m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>5286</u>	<u>0</u>	ft. (m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	<u>5286</u>	<u>0</u>	ft. (m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade <u>7</u>			
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h <u>970</u> sq. in.			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
Bruce Smith

LICENSE NUMBER
PLS 7048

TITLE
Professional Land Surveyor

COMPANY NAME
Alpine Enterprises Inc.

ADDRESS
P.O. Box 2037

CITY
Ketchum

STATE
ID

ZIP CODE
83340

SIGNATURE
Bruce Smith

DATE
11-03-00

TELEPHONE
208-727-1988

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. 441 Della Vista Drive, Hailey, ID or P.O. Box 6355, Ketchum, ID 83340			Policy Number
CITY Hailey	STATE ID	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 Top of concrete foundation at elev. 5287.0

Attached: copy of portion of FIRM Panel 0664 D showing subject location

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.

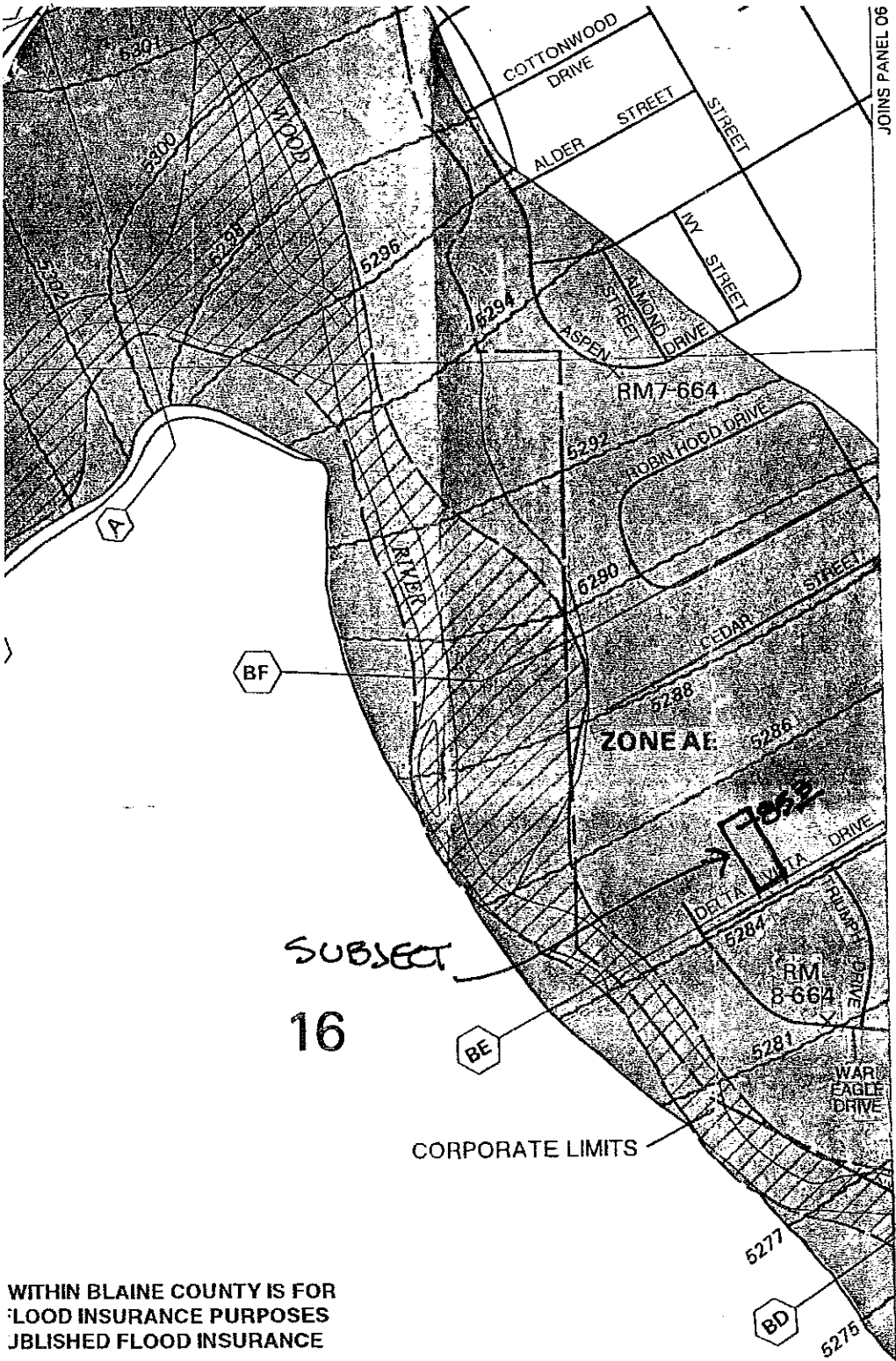
G4. PERMIT NUMBER _____	G5. DATE PERMIT ISSUED _____	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED _____
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- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building 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



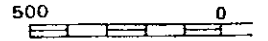
FLOOD INSURANCE RATE
 APRIL 17, 1978
 FLOOD INSURANCE RATE

Map revised March 17, 1997
 change base flood elevations, to change
 add roads and road names, and to
 information.

To determine if flood insurance is an
 agent or call the National Flood
 638-6620.



APPROXIMATE SCALE



WITHIN BLAINE COUNTY IS FOR
 FLOOD INSURANCE PURPOSES
 ESTABLISHED FLOOD INSURANCE

IN THIS PANEL
 TOWNSHIP 2
 EAST.

NATIONAL FLOOD

FIRM
FLOOD INSURANCE

CITY OF
HAILEY,
 IDAHO
 BLAINE COUNTY

PANEL 664
 (SEE MAP INDEX)

Colours by
 R. C. Fox
 Ketchikan

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

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Designation Date: _____

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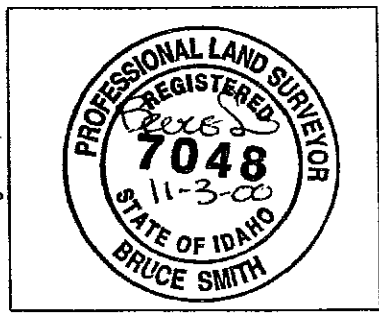
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License Number, Embossed Seal, Signature, and Date



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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 Bruce Smith	LICENSE NUMBER PLS 7048
TITLE Professional Land Surveyor	COMPANY NAME Alpine Enterprises Inc.
ADDRESS P.O. Box 2037	CITY Ketchum
SIGNATURE <i>Bruce Smith</i>	STATE ID
	ZIP CODE 83340
	DATE 11-03-00
	TELEPHONE 208-727-1988