

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: TOM FITCH

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.: 531 ROBIN HOOD DR.

CITY: HAILEY STATE: Id ZIP CODE: 83333

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): Lot 16, Block 4, Sherwood Forest Subd

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.): RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###" or ##.####"): _____

HORIZONTAL DATUM: NAD 1927 NAD 1983

SOURCE: GPS (Type): _____ USGS Quad Map Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER: HAILEY

B2. COUNTY NAME: BLAINE

B3. STATE: Id

B4. MAP AND PANEL NUMBER: <u>160233 0604</u>	B5. SUFFIX: <u>D</u>	B6. FIRM INDEX DATE: <u>3/17/97</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE: <u>3/17/97</u>	B8. FLOOD ZONE(S): <u>AE</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding): <u>5289.12</u>
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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.

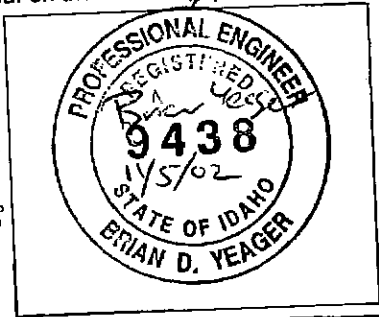
C2. Building Diagram Number 4 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

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 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 _____ Conversion/Comments _____

Elevation reference mark used RM 7-644 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>5289</u>	<u>2</u> ft.(m)
<input type="checkbox"/> b) Top of next higher floor	<u>5293</u>	<u>2</u> ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>5291</u>	<u>5</u> ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	<u>NA</u>	ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>5289</u>	<u>9</u> ft.(m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>5291</u>	<u>2</u> ft.(m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	<u>9</u>	ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>1137.62</u>	sq. in. (sq. cm)
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h		



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: Brian Yeager LICENSE NUMBER: 9438

TITLE: Civil Engineer COMPANY NAME: Galena Engineering

ADDRESS: Po Box 425 CITY: Ketchum STATE: Id ZIP CODE: 83340

SIGNATURE: Brian Yeager DATE: 1/5/02 TELEPHONE: 208-788-1755

ATTN: Building Inspector
788-2924

ATTN: Sandra
Fax 726-1717
Voice 726-6000
2 pages

CITY OF HAILEY

LOWEST CONSTRUCTION ELEVATION CERTIFICATE

Date: 10-25-02 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: TOM FITCH Address: 531 ROBIN HOOD DR.

Property Description:

Subdivision: SHERWOOD Lot 16, Block 1, Plat _____

FIA Map Panel on which property is located: 160022 0664

FIA Map Zone in which property is located: AE

Base Flood Elevation at the proposed site: 5289¹⁰

Required minimum elevation of lowest floor: 5297⁶⁹ FF PROPOSED

ELEVATION CERTIFICATE

I certify that the building at the property location described above has the lowest floor at an elevation of 5293¹⁰ feet, NGBD (mean sea level). FF DWELLING

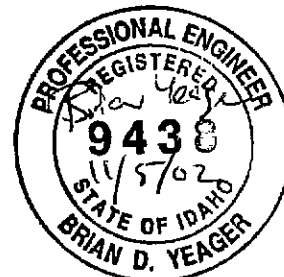
Date: 11/5/02 Certifier's Name: Brian Yeager

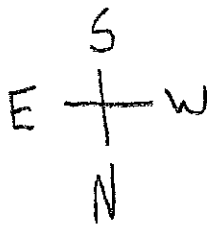
Title: Civil Engineer

Address: P.O. Box 425 Ketchum Id 83340

Signature: Brian Yeager

Affix Seal or Stamp





THOMAS J. FITCH CONSTRUCTION, LLC
311 ROBIN HOOD DRIVE
HAILEY, ID 83333
(208) 788-8818 (208) 727-7623

531 Robin Hood Landscape Plan

10 yds.

