U.S. DEPARTMENT OF HOMELAND SECURITY

## ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency National Flood Insurance Program Important: Read the instructions on pages 1-8. SECTION A - PROPERTY INFORMATION For Insurance Company Use: A1. Building Owner's Name Policy Number MOUNTAIN HOME OF A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number SOUTH MAIN STREET ZIP Code 8364 City State MOUNTAIN DAHO tom A3. Property Description (Lotrand Block Numbers, Tax Parcel Number, Legal Description, etc.) 36 SECTION ART OFN Subdivision BUILDING Long. 115-41-07 Horizontal Datum: NAD 1927 NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number A8. For a building with a crawl space or enclosure(s), provide: A9. For a building with an attached garage, provide: 1680 sq ft a) Square footage of crawl space or enclosure(s) a) Square footage of attached garage sq ft b) No. of permanent flood openings in the attached garage b) No. of permanent flood openings in the crawl space or 8 enclosure(s) walls within 1.0 foot above adjacent grade walls within 1.0 foot above adjacent grade \_// 840 sq in c) Total net area of flood openings in A8.b C) Total net area of flood openings in A9.b sa in SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State MOUNTAIN HOMECITY IDAHO 1600 MORE B4. Map/Panel Number B5. Suffix B6. FIRM Index **B7. FIRM Panel** B8. Flood B9. Base Flood Elevation(s) (Zone Date Effective/Revised Date Zone(s) AO, use base flood depth) 0005 15-94 3-15-94 3.0 E B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. FIRM Community Determined FIS Profile Other (Describe) NAVD 1988 B11. Indicate elevation datum used for BFE in Item B9: MGVD 1929 Other (Describe) B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? No Yes CBRS OPA Designation Date\_ SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) Finished Construction C1. Building elevations are based on: Construction Drawings\* Building Under 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-g below according to the building diagram specified in Item A7. 3142.772 below according to the building diagram specified in Item A7, 1929 Benchmark Utilized <u>C-170</u> B.C. @ old choo GVD High Vertical Datum NIA Conversion/Comments Check the measurement used. 312/ 94 feet Top of bottom floor (including basement, crawl space, or enclosure floor) meters (Puerto Rico only) a) 3126, 70 V feet Top of the next higher floor meters (Puerto Rico only) b) c) Bottom of the lowest horizontal structural member (V Zones only) feet meters (Puerto Rico only) feet meters (Puerto Rico only) d) Attached garage (top of slab) 70 Feet Lowest elevation of machinery or equipment servicing the building meters (Puerto Rico only) e) (Describe type of equipment in Comments) 3123.85 Teet 3/24.27 Difeet Lowest adjacent (finished) grade (LAG) f) meters (Puerto Rico only) Highest adjacent (finished) grade (HAG) meters (Puerto Rico only) (p 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. here if comments are provided on back of form Number Title Company Name 15 83642 Address City State ZIP Code Telephone Signat Date 846-8937

FEMA Form 81-31, February 2006

See reverse side for continuation.

Replaces all previous editions

IMPORTANT: In these sp	paces, copy the corres	ponding information	n from Sectio	on A.		For Insurance Company Use:
Building Street Address (includ	ding Apt., Unit, Suite, and/c	pr Bldg. No.) or P.O. Rou	ute and Box No		Iding	Policy Number
Dity Mountain	Home	State Edaho	011100	826		Company NAIC Number
	ECTION D - SURVEYOR		RCHITECT C	000	71	
Copy both sides of this Elevati			the local design of the lo		Contraction of the later of the	
Comments						
ignature			Date			
SECTION E - BUILDIN	G ELEVATION INFOR					D ZONE A (WITHOUT BFE)
For Zones AO and A (without and C. For Items E1-E4, use	BFE), complete Items E1-E natural grade, if available	<ol> <li>If the Certificate is in Check the measurement</li> </ol>	ntended to support used. In Pue	port a LOMA	or LOMR-F re	equest, complete Sections A, B,
						ove or below the highest adjacen
grade (HAG) and the lov	west adjacent grade (LAG).		<b></b>			
<ul> <li>a) I op of bottom floor (ir</li> <li>b) Top of bottom floor (ir</li> </ul>	ncluding basement, crawl s ncluding basement, crawl s	pace, or enclosure) is	·		processory.	ove or below the HAG.
2. For Building Diagrams 6	-8 with permanent flood op	enings provided in Secti	ion A Items 8 a	nd/or 9 (see	page 8 of Inst	ructions), the next higher floor
(elevation C2.b in the dia	agrams) of the building is	feet	meters	above or	below the	HAG.
<ol> <li>Attached garage (top of 4. Top of platform of machine)</li> </ol>	inery and/or equipment ser	feet meters a				ove or below the HAG.
						ommunity's floodplain managem
ordinance? Yes		local official must certify				, , ,
SE	ECTION F - PROPERTY		ED'S DEDDE	SENTATIV		CATION
an a						-issued or community-issued Bf
r Zone AO must sign here. 7						chooded of community-issued bi
Property Owner's or Owner's A	Authorized Representative'	s Name				
Address		Cit	ty		State	ZIP Code
lignature		Da	to		Telephone	
-		08			relephone	
Comments						
						Check here if attach
	SECTION	G - COMMUNITY IN	FORMATION	N (OPTION	AL)	
						complete Sections A, B, C (or I
d G of this Elevation Certifica						G8. and G9. surveyor, engineer, or architect
<ol> <li>The information in Sec is authorized by law to</li> </ol>	o certify elevation information	on. (Indicate the source	as been signed and date of the	e elevation d	ata in the Con	surveyor, engineer, or architect nments area below.)
	completed Section E for a b					
	tion (Items G4G9.) is prov					
64. Permit Number	G5. Date Permit	t Issued	G6. [	Date Certific	ate Of Complia	ance/Occupancy Issued
7. This permit has been issued	d for: New Constructi	on Substantial	Improvement			
3. Elevation of as-built lowest f			mprovement	☐ feet □	] meters (PR	) Datum
9. BFE or (in Zone AO) depth					meters (PR)	
				ha		
ocal Official's Name			Title			
Community Name			Telephone			
lignature			Date			
Comments						
						Check here if attach
EMA Form 81-31, February	/ 2006					Check here if attach Replaces all previous ed

## Building Photographs See Instructions for Item A6.

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number
1150 South Main Street Office Building	
City State ZIP Code	Company NAIC Number
MOUNTAIN HOME IDAHO 83647	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.





