## U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

## **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.

The state of the s	
SECTION A - PROPERTY INFORMATION	For Insurance Company Use:
A1. Building Owner's Name  AND DULLAINE V. CLARK	Policy Number
A2. Building Street Address (Including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No.	Company NAIC Number
City Calorido Springs State Co	ZIP Code 80918
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	•
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 a) Square footage of crawl space or enclosure(s) \( \)  b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 footabove adjacent grade \( \)  walls within 1.0 footabove adjacent grade	attached garage, provide: NAD 1983  attached garage sq ft flood openings in the attached garage obd openings in A9.b sq in
31. NFIP Community Name & Community Number B2. County Name	B3. State
COLORADO SPRINGE OBOOGO EL PASO	COLORADO
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date Effective/Revised Date Zone(s)  D8041C5516 F MAR. 17, 1997 MAR. 17, 1997 AE, X	AO, use base flood depth)
10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.	
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe) ☐ I1. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe)	e)
12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA Designation Date CBRS OPA	·
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQ	UIRED)
1. Building elevations are based on: Construction Drawings* Building Under Construction*  *A new Elevation Certificate will be required when construction of the building is complete.  2. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, Al below according to the building diagram specified in Item A7.  Benchmark Utilized Vertical Datum Vertical Datum  Conversion/Comments	Finished Construction  R/AH, AR/AO. Complete Items C2.a-g
Check the meas	urement used.
b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	meters (Puerto Rico only)
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICA	TION
his certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify ele- information. I certify that the information on this Certificate represents my best efforts to interpret the data available understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 100.  Check here if comments are provided on back of form.	evation
Certifier's Name KEVIN F. LLOYD PLS 26965	The same and the
Company Name Company Name	1-19-09-58
Address P.O. Box 5101 Clay DIAND PARK State. ZIP Code Signature 1. Telephone Telephone	1 500 0/MAT + VVIO 200 1
Signature Kevi 7, 20 gb 1-19-09 Telephone 719-687-0920	9