

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>Chance & BRIGHT NYGARD</u>		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>7820 CASEY CIRCLE</u>		Company NAIC Number
CITY <u>ANCHORAGE</u>	STATE <u>AK</u>	ZIP CODE <u>99507</u>
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>LOT 15, BIG FOOT SUBDIVISION</u>		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) <u>Residential</u>		
ATTITUDE/LONGITUDE (OPTIONAL) ##°-##'-##.##" or ##.####'		
HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input 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

1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>Anchorage 020005-0243C</u>		2. COUNTY NAME <u>NA</u>		3. STATE <u>AK</u>	
4. MAP AND PANEL NUMBER <u>020005-0243C</u>	5. SUFFIX <u>C</u>	6. FIRM INDEX DATE <u>5-5-90</u>	7. FIRM PANEL EFFECTIVE/REVISED DATE <u>7-02-02</u>	8. FLOOD ZONE(S) <u>A1</u>	9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>200.00</u>
10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <u>Greater Anchorage Area Borough Post Quake U.S.G.S. Mean Sea Level 1972</u>					
<input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe): _____					
11. Indicate the elevation datum used for the BFE in B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input checked="" type="checkbox"/> Other (Describe): _____					
12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

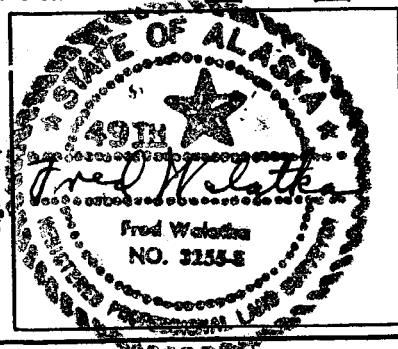
1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

2. Building Diagram Number 3 (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.)

3. 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 G.A.B. Conversion/Comments Elevation of Benchmark is 218.91

Elevation reference mark used G.A.B. 118 Does the elevation reference mark used appear on the FIRM? Yes No

<input checked="" type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>203</u> . <u>95</u> ft.(m)
<input checked="" type="checkbox"/> b) Top of next higher floor	<u>208</u> . <u>00</u> ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>N/A</u> . _____ ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	<u>203</u> . <u>95</u> ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>205</u> . <u>45</u> ft.(m)
<input checked="" type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>205</u> . <u>30</u> ft.(m)
<input checked="" type="checkbox"/> g) Highest adjacent grade (HAG)	<u>207</u> . <u>00</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)



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 Fred Walatka LICENSE NUMBER 3255-S

TITLE Owner COMPANY NAME Fred Walatka & Assoc.

ADDRESS 3107 W. 29th Ave. CITY Anchorage STATE AK ZIP CODE 99517

SIGNATURE Fred Walatka DATE 9-30-02 TELEPHONE 907 248-1666