U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

ELEVATION CERTIFICATE IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

National Flood Insurance Program

	CATION A DESCRIPTION		- T-	OR MOURANCE CONTRAIN HOE	
SECTION A – PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name CITY OF MTN. HOME				olicy Number:	
A2. Building Street Address (including Apt., Unit. Suite, and/or Bldg. No.) or P.O. Route and Box No. CITY OF MTN. HOME GOLF COURSE). C	ompany NAIC Number:	
City MTN. HOME		State ID.	۷۱۲	^{2 Code} 83647	
A3. Property Description (Lot and Block Numbers, Tax Pr INDOOR/DRIVING SHED PARCEL#RPA3S)	07E302410				
A6. Attach at least 2 photographs of the building if the (A7. Building Diagram Number 1B.	Long. 115°40'	23" I to obtain flood in:	surance.	ntum: ☐ NAD 1927	
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s)	1000		ouilding with an attai uare footage of atta	NI/A	
b) Number of permanent flood openings in the craw or enclosure(s) within 1.0 foot above adjacent gr	vispace 0	b) Nu		flood openings in the attached garage	
c) Total net area of flood openings in A8.b			tal net area of flood		
d) Engineered flood openings? Yes No		d) En	gmeered flood open	ings? ☐ Yes 🔀 No	
SECTION B - FL	OOD INSURANCE R	ATE MAP (FIRM	M) INFORMATION		
B1. NFIP Community Name & Community Number CITY OF MTN. HOME	B2. Count	y Name E COUNTY		B3. State IDAHO	
B4. Map/Panel Number B5. Suffix B6. FIRM Inc		Panel Effective/	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone	
160058005 C 03/15/		ed Date /15/1994	AO	AO, use base flood depth) 3150.23	
B10. Indicate the source of the Base Flood Elevation (BFf			n B9:	700 0100	
▼ FIS Profile		NAVD 1988	Other/Source:		
B11. Indicate elevation datum used for BFE in Item B9: B12. Is the building located in a Coastal Barrier Resource			to the second of		
Designation Date: / /		or Otherwise Frote	ected Area (OFA)?	L res Zino	
SECTION C - BUIL	DING ELEVATION IN	FORMATION (S	URVEY REQUIRE	ED)	
C1. Building elevations are based on: Construct A new Elevation Certificate will be required when co		Building Under Co	onstruction*	§Fin:shed Construction	
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE C2.a–h below according to the building diagram spe Benchmark Utilized: OZ0569 / C 170	cified in Item A7. In Pue		r meters.	AR/AO. Complete Items	
Indicate elevation datum used for the elevations in i				Other/Source	
Datum used for building elevations must be the san	27 P. J. (1984 – 1984) A. (1984) B.			surement used.	
a) Top of bottom floor (including basement, crawlspa	ace, or enclosure floor)	3151 56	X feet	meters	
b) Top of the next higher floor		N/A		meters	
c) Bottom of the lowest horizontal structural member	er (V Zones only)	N/A	feet	meters	
d) Attached garage (top of slab)		N/A	feet	meters	
 e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com 		N/A , 0	∑ feet	meters	
f) Lowest adjacent (finished) grade next to building		3150 . 37	⊠ feet	meters	
g) Highest adjacent (finished) grade next to building		3151 27	X feet	☐ meters	
 h) Lowest adjacent grade at lowest elevation of dec structural support 	k or stairs, including	3151 . 27	Ifeet	☐ meters	
SECTION D - SUI	RVEYOR, ENGINEER	OR ARCHITEC	T CERTIFICATIO	V	
This certification is to be signed and sealed by a land surv information, I certify that the information on this Certificate	represents my best effo	rts to interpret the	data available.	0.5 1.640	
I understand that any false statement may be punishable by Check here if comments are provided on back of form.	vine or imprisonment u Were latitude and l			CONAL LAND SE	
Check here if attachments.	licensed land surve	eyor? 🗌 Yes	⊠ No	SONAL LAND SUPLEMENTED TO THE SECONDARY OF THE SECONDARY	
Certifier's Name JOSEPH R. JONES		License No 13992	imbei	Se 13992	
Tale LAND SURVEYOR	JJ HOWARD EI		700.0	17/15/150	
Address 5983 W. STATE ST., STE. D	BOISE	IDA State	ZIP Code 83703	THE OF TOPIE	
Signature DA	Date	Telephone		and the second	

ELEVATION CERTIFICATE, page 2

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE		
CITY OF MTN. HOME GOL				Policy Number:	
MTN. HOME	State ID.	ZIP Code 83647		Company NAIC N	lumber:
SECTIO	ON D – SURVEYOR, ENGINEER, O	R ARCHITECT CI	ERTIFICATION (C	CONTINUED)	
	rtificate for (1) community official, (2) in	9	pany, and (3) buildir	ng owner.	
Comments THERE IS NO EQUIP	PMENT SERVICING THE BUILDIN	IG.			
		THE RESERVE OF THE PARTY OF THE			
- A)					
Signature (H)		Date 07/15/	2015		
SECTION E- BUILDING EL	EVATION INFORMATION (SURVE	Y NOT REQUIRE	D) FOR ZONE AC	AND ZONE	(WITHOUT BFE)
	omplete Items E1–E5. If the Certificate if available. Check the measurement us			F request, comp	lete Sections A. B.and C.
grade (HAG) and the lowest adjac	The state of the s	e boxes to show whe			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	basement, crawlspace, or enclosure) is		[] feet [] met		r Delow the HAG.
	basement, crawlspace, or enclosure) is permanent flood openings provided in S	notion A Home 9 and	☐ feet ☐ met		r Delow the LAG.
	2.b in the diagrams) of the building is	ection a items o dife	or 9 (see pages 8 ∏ feet ☐ met		r 🔲 below the HAG.
E3. Attached garage (top of slab) is	2.5 in the diagrams, or the bollding is		☐ feet ☐ met		r below the HAG.
E4. Top of platform of machinery and	d/or equipment servicing the building is	Andrewson and the state of the	☐ feet ☐ met	ers 🗀 above o	r Delow the HAG.
	umber is available, is the top of the bot] Unknown. The local official must certif			ne community's fl	oodplain management
SECTIO	ON F - PROPERTY OWNER (OR O	WNER'S REPRES	SENTATIVE) CER	TIFICATION	
The property owner or owner's autho Zone AO must sign here. The statem	rized representative who completes Sections A. B. and E are correct	ctions A, B, and E for	r Zone A (without a l	FEMA-issued or c	ommunity-issued BFE) or
Property Owner or Owner's Authorize					
Address		City	St	ate ZIP	Code
Signature		Date	Te	elephone	
Comments	The second secon			TOTAL CONTROL OF STATE OF STAT	
					ck here if attachments.
	SECTION G - COMMUNIT	TY INFORMATION	(OPTIONAL)		
The local official who is authorized by G of this Elevation Certificate. Comple	law or ordinance to administer the comp ete the applicable item(s) and sign below	nunity's floodplain ma . Check the measure	nnagement ordinance ment used in Items	e can complete Se G8–G10. In Puert	ections A, B, C (or E), and o Rico only, enter meters.
who is authorized by law to	C was taken from other documentation certify elevation information. (Indicate ted Section E for a building located in Z	the source and dat	e of the elevation d	ata in the Comm	ents area below.)
	tems G4-G10) is provided for commun			unity-issued bril)	or zone Ao.
G4. Permit Number	G5. Date Permit Issued	G6	. Date Certificate Of	Compliance/Occ	cupancy Issued
G7. This permit has been issued for	r: New Construction Subst	antial Improvement		THE STATE OF THE S	And the second s
	r (including basement) of the building:	*	☐ feet ☐ mete		
G9. BFE or (in Zone AO) depth of flo G10. Community's design flood eleva			☐ feet ☐ mete		
	augn.		Lifeet Limete	ers Datum	
Local Official's Name		Title			
Community Name	A STATE OF THE STA	Telephone			
Signature		Date			The state of the s
Comments					
	The state of the s				
The second secon			THE RESIDENCE AND RESIDENCE AN	····	Manufacture (Commence of the
				[] Che	ck here if attachments.

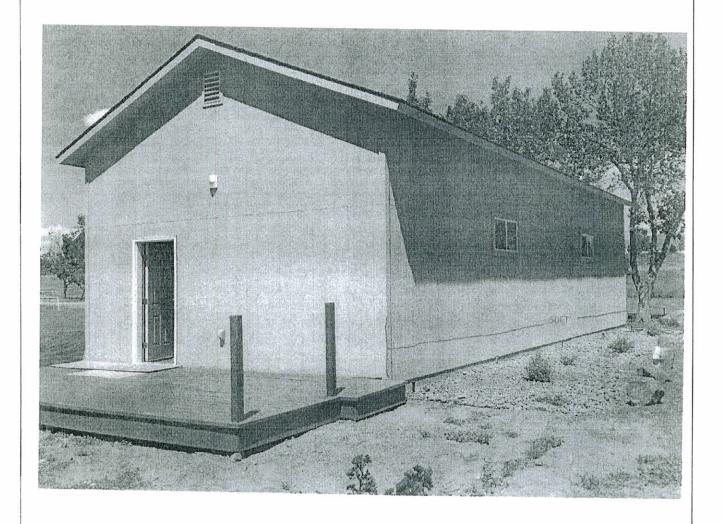
ELEVATION CERTIFICATE, page 3

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg, No.) or 90. Route and Box No. CITY OF MTN. HOME GOLF COURSE			FOR INSURANCE COMPANY USE
			Policy Number:
MTN. HOME	State ID,	ZIP Code 83647	Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



ELEVATION CERTIFICATE, page 4

BUILDING PHOTOGRAPHS

Continuation Page

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., U CITY OF MTN, HOME GOLF CO	Policy Number:	
City MTN. HOME	State ZIP Code ID. 83647	Company NAIC Number:

If submitting more photographs than will fit on the preceding page, affix the additional photographs below, Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

