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

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires March 31, 2012

National Flood Insurance Program Important: Read the instructions on pages 1-9.

				ION A - PROP	ERTY INFOR	RMATION	For insurance Company Use:
A1. Buildin	ng Owner's Name	Jack and Simo	ne Patterson				Policy Number
08 Lader	2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 08 Ladera Road						Company NAIC Number
City (Ojai State CA	ZIP Code 930)23				
A3. Proper Tax Parcel	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Parcel 014-0-080-240 Legal desc= Parcel 2 of LLA 94-110710						
A5. Latitud A6. Attach A7. Buildin A8. For a I a) Sq b) No en c) To	de/Longitude: Lat at least 2 photo ng Diagram Num building with a cr quare footage of o. of permanent f iclosure(s) within	t. 34.4686° Long graphs of the buil ber 1A awispace or end crawispace or en lood openings in 1.0 foot above a bod openings in A	closure(s) the crawlspace or djacent grade	izontal Datum: 🛭	NAD 1927 le obtain flood in A9. For a) b)	surance. a building with an att. Square footage of att	ached garage 805 sq ft od openings in the attached garage adjacent grade 0 sq in
				NSURANCE F	ATE MAP (F	IRM) INFORMATIO	ON
B1. NFIP C 060413 5		& Community N		B2. County Nam Ventura	e		B3. State CA
·	Panel Number 555	B5. Suffix B	B6. FIRM index Date /o/3//\$5 levation (BFE) data	Effective 10	IRM Panel (Revised Date 0/31/85	B8. Flood Zone(s) AO	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 3 FEET
P12. Is the	11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) 12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date 13. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) 14. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) 15. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) 16. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) 17. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) 18. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in Item B9: NGVD 1929 Other (Describe) 19. Indicate elevation datum used for BFE in						
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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-h below according to the building diagram specified in Item A7. Use the same datum as the BFE. Benchmark Utilized 83-23Vertical Datum NGVD29 Conversion/Comments							
a) To	p of bottom floor	(including hasen	nent, crawlspace, or	enclosure floor	1147 n 🖂	Check the measur I feet I meters (Pu	
b) To	p of the next hig!	ner floor				☐ feet ☐] meters (Puerto Rico only)
	ttom of the lowes ached garage (to		ctural member (V Zor		1147.0		meters (Puerto Rico only)
e) Lo	west elevation of	machinery or eq	uipment servicing the			feet I meters (Pur	
			ation in Comments) at to building (LAG)		1134.0 🛭	feet 🔲 meters (Pu	erto Rico oniv)
g) Hig	jhest adjacent (fi	nished) grade ne	xt to building (HAG)			feet 🔲 meters (Pu	erto Rico only)
	west adjacent gra uctural support	·····	vation of deck or sta		***************************************] meters (Puerto Rico only)
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be sized and social by a land							
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. Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No							
Certifier's Name Gary P Salmen, LS License Number LS 5018 (CA)							
e Land Surveyor Company Name GP Salmen & Associates							
	57 Dorothy Aven	lue //	City Ventura		State CA	ZIP Code 9300	03 OF CALIFORNIA
Signature	08/1211	1 1/1	Date J	uly 27, 2009	Telephone 80	5 701-6788	CALIFO

	the corresponding informati		0.0001030	linsurance Company Use licy Number
108 Ladera Road	,			
city OjaiState CA ZIP Code 93023	C	mpany NAIC Number		
SECTION D -	SURVEYOR, ENGINEER, OR	ARCHITECT CERTI	FICATION (CONTIN	UED)
ny both sides of this Elevation Certificate		ance agent/company, a	nd (3) building owner.	
nments C2.e) "Equipment" = Air Condit" HAG" and "LAG" herein is flowline of engin	tioning to be installed secred swale on west and east side	\$.		
- //	\mathcal{M}			
(X) aku)				
ignature / //		Date 07/27/09		Check here if attachme
SECTION E - BUILDING ELEVAT	ION INFORMATION (SURVEY	NOT REQUIRED) F	OR ZONE AO AND	
For Zones AO and A (without BFE), comple	ete Items E1-E5. If the Certificate it	s intended to support a	LOMA or LOMR-F reg	est, complete Sections A. B.
and C. For Items E1-E4, use natural grade	, if available. Check the measuren	nent used. In Puerto Ri	co only, enter meters.	,
 Provide elevation information for the t grade (HAG) and the lowest adjacent 		boxes to show whethe	the elevation is above	or below the highest adjacent
a) Top of bottom floor (including base b) Top of bottom floor (including base			ters ⊠ above or □ b eters ⊠ above or □	
E2. For Building Diagrams 6-9 with perma	anent flood openings provided in S	ection A Items 8 and/or	9 (see pages 8-9 of Ins	tructions), the next higher floo
(elevation C2.b in the diagrams) of th E3. Attached garage (top of slab) is 3.0		et ☐ meters ☐ abov or ☐ below the HAG.	e or 🔲 below the HA	3.
E4. Top of platform of machinery and/or e	equipment servicing the building is	3.0 🛭 feet 🗌 meters		
E5. Zone AO only: If no flood depth num	•			munity's floodplain manageme
ordinance? ⊠ Yes □ No □ Un	PROPERTY OWNER (OR OW		فاحده فيحاد والمستحدد والمراب والمرابعة فيمس ومعمل بالمرابع	ATION
he property owner or owner's authorized r	epresentative who completes Sect	ions A, B, and E for Zon	e A (without a FEMA-i	
or Zone AO must sign here. The statement	······································	ct to the best of my kno	wledge.	
Property Owner's or Owner's Authorized Ro Tary P Salmen, LS	epresentative s-ivanie			
dress 257 Dorothy Avenue		City Ventura	State CA	ZIP Code 93003
	} 	Date 07/27/09	Talaakaa.	(805) 701-6788
unature	X /	Date GIIZIIOS	i elepnone	` '
Comments	Alise Land		i elepnone	*
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- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Alisa			
Comments William	SECTION G - COMMUNITY	INFORMATION (OF	PTIONAL)	Check here if attach
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Building Photographs See Instructions for Item A6.

					For Insurance Company Use:
10	t Address (including A)	ot., Unit, Suite, and/or B RANCH	ldg. No.) or P.O. Ro	ute and Box No.	Policy Number
City OTV	45	State		7 ZIP Code 2223	Company NAIC Number
the instruction	ns for Item A6. Identi	fy all photographs wit	h: date taken: "Fro	nt View" and "Rear \	otographs below according to /iew"; and, if required, "Right use the Continuation Page,
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5/23/09 3/W comm.



U123/09 WEST EleMTTO RIGHT



Building Photographs Continuation Page

	Continuation Pag		For Insurance Company Use:
Building Street Address (including Apt., Unit	Suite, and/or Bldg, No.) or P.O.	Route and Box No	Policy Number
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If submitting more photographs than w photographs with: date taken; "Front View House Crast-LEFT"	ill fit on the preceding page, w" and "Rear View"; and, if red	affix the additional photo	graphs below. Identify all
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bast Left

