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

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires March 31, 2012

National Flood Insurance Program

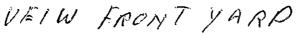
Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION	For Insurance Company Use
A1. Building Owner's Name Mel F. Cummings	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6801 Wheeler Canyon Rd.	Company NAIC Number
City State	ZIP Code
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) APN# 062-0-032-215	3060
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. 34 22 53 02 N Long. 119 8 34 07 W 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 3 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) No. of permanent flood openings in the crawlspace or b) No. of permanent flood	tached garage: tached garage <u>1,066</u> sq ft od openings in the attached garage
enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b d) Engineered flood openings? Yes XNo enclosure(s) within 1.0 foot above within 1.0 foot above on the flood openings in A8.b N/A sq in c) Total net area of flood openings? Yes XNo d) Engineered flood openings?	e adjacent grade N/A od openings in A9.b N/A sg in
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	ON
B1. NFIP Community Name & Community Number B2. County Name	B3. State
Unincorporated Ventura County060413 Ventura B4. Map/Panel Number B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood	CA
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/Revised Date B8. Flood Zone(s) 060413 07501 B 9/3/97 10/31/85 A	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.	738.26
FIS Profile FIRM Community Determined XX Other (Describe) FEMA Quick	-2 Program
B11. Indicate elevation datum used for BFE in Item B9: X NGVD 1929 NAVD 1988 Other (Describe)	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date N/A CBRS OPA	Yes X No
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQU	IRED)
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.	KX Finished Construction
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. below according to the building diagram specified in Item A7. Use the same datum as the BFE. Benchmark Utilized <u>VC 89-17RM-1</u> Vertical Datum 770 - 995	/AH, AR/AO. Complete Items C2.a-h
Conversion/Comments Brass Disk Vertical Datum 770.995	
Check the measur	rement used.
	neters (Puerto Rico only)
C) Rofford of the Journal hardwarfal structure 0.17	neters (Puerto Rico only)
d) Affected general flow of class	neters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	neters (Puerto Rico only) neters (Puerto Rico only)
	neters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including 748 7 10 feet in	neters (Puerto Rico only) neters (Puerto Rico only)
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICAT	
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevinformation. I certify that the information on this Certificate represents my best efforts to interpret the data available.	otion
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	ya Salata A
licensed land surveyor? Yes No Certifier's Name License Number	
Thomas K. Hatch C18451	0018451
Title Company Name	Con the state of t
Address City State ZIP Code	
Signature Date Telephone	- COF CALLES
(805) 452-6531	

IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6801 Wheeler Canyon Road City State ZIP Code Company NAIC Number Santa Paula CA 93060 SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED) Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner. Comments Bottom of wall mount tank less water heater is at 752.95 elevation in basement. Basement slab top 748.97 Garage Slab top 754.97
6801 Wheeler Canyon Road City State ZIP Code Company NAIC Number Santa Paula CA 93060 SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED) Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner. Comments Bottom of wall mount tank less water heater is at 752,95 elevation in basement.
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Bottom of wall mount tank less water heater is at 752.95 elevation in basement.
Basement slab top 748.97 Garage Slab top 754.97
Signature Date 4/19/20// SX Check here if attachmen
SECTION E BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters. E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFF or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.
Property Owner's or Owner's Authorized Representative's Name
Property Owner's or Owner's Authorized Representative's Name Mel F. Cummings
Property Owner's or Owner's Authorized Representative's Name Mel F. Cummings City State ZIP Code
Property Owner's or Owner's Authorized Representative's Name Mel F. Cummings City State ZIP Code Oxnard Oxnard Date 4/2 4/1/ Telephone
Property Owner's or Owner's Authorized Representative's Name Mel F. Cummings Address City State ZIP Code Oxnard CA 93035 Signature Mul 7 Munimum Date 4-2 4- 10 Telephone (805) 320-3636
Property Owner's or Owner's Authorized Representative's Name Mel F. Cummings City State ZIP Code Oxnard Oxnard Date 4/2 4/1/ Telephone
Property Owner's or Owner's Authorized Representative's Name Mel F. Cummings Address City State ZIP Code Oxnard Oxnard Date 4-2 4- 10 Telephone (805) 320-3636
Property Owner's or Owner's Authorized Representative's Name Mel F. Cummings Address City State 2IP Code 93035 CA 93035 Signature Date 4-24-10 Telephone (805) 320-3636 Comments SECTION G - COMMUNITY INFORMATION (OPTIONAL)
Property Owner's or Owner's Authorized Representative's Name Mel F. Cummings Address Address Oxnard Oxnard
Property Owner's or Owner's Authorized Representative's Name Me] F. Cummings
Property Owner's or Owner's Authorized Representative's Name Mel F. Cummings Address Address Oxnard Oxnar
Property Owner's or Owner's Authorized Representative's Name Mol F. Cummings
Property Owner's or Owner's Authorized Representative's Name Mel F. Cummings Address 4445 Falkirk Bay Oxnard Date 4-2 4- / O Telephone Comments SECTION G - COMMUNITY INFORMATION (OPTIONAL) The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9. G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect with a suthorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.) G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
Property Owner's or Owner's Authorized Representative's Name Mel F. Cummings Address 4445 Falkirk Bay Oxnard Oxnard Oxnard Oxnard Oxnard CA 93035 Signature Date 4-2 4- / O Telephone (805) 320-3636 Check here if attachn SECTION G - COMMUNITY INFORMATION (OPTIONAL) The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9. G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect via authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.) G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. G3. The following information (Items G4-G9) is provided for community floodplain management purposes.
Property Owner's or Owner's Authorized Representative's Name Mel F. Cummings Address 4445 Falkirk Bay Oxnard CA 93035 Signature Date Comments Comm
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Property Owner's or Owner's Authorized Representative's Name Me] F. Cummings Address City State ZIP Code Oxnard CA 93035 Signature Mc 7 Date 4-2 9- / O Telephone Comments Check here if attachm SECTION G - COMMUNITY INFORMATION (OPTIONAL) The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9. G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect via authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.) G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. G3. The following information (Items G4-G9) is provided for community floodplain management purposes. G4. Permit Number G5. Date Permit Issued O//30/2-0/O G7. This permit has been issued for: New Construction Substantial Improvement
Property Owner's or Owner's Authorized Representative's Name Me
Property Owner's or Owner's Authorized Representative's Name Mel F. Cummings Address 4445 Falkirk Bay Oxnard CA 93035 Signature Mul 7 Date Oxnard CA 93035 Comments Check here if attacher SECTION G - COMMUNITY INFORMATION (OPTIONAL) The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9. C1. In information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect via suthorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.) G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. G3. The following information (Items G4-G9) is provided for community floodplain management purposes. G4. Permit Number G5. Date Permit issued O//34/2008 G6. Date Certificate Of Compliance/Occupancy Issued O//30/20/0 G7. This permit has been issued for: New Construction Substantial Improvement G8. Elevation of as-built lowest floor (including basement) of the building T48 F197 F198 F
Property Owner's or Owner's Authorized Representative's Name Me F
Property Owner's or Owner's Authorized Representative's Name Mel F Cummings Address 4445 Falkink Bay Oxnand Signature Puil P Cummings Oxnand CA 93.0.35 Telephone (8.0.5) 32.0 – 36.36 Comments SECTION G - COMMUNITY INFORMATION (OPTIONAL) The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9. G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect via authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.) G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. G3. The following information (Items G4-G9) is provided for community floodplain management purposes. G4. Permit Number G5. Date Permit Issued O//24/2008 G6. Date Certificate Of Compliance/Occupancy Issued O//24/2008 G7. This permit has been issued for: New Construction Substantial Improvement G8. Elevation of as-built lowest floor (Including basement) of the building 748 G9. BFE or (in Zone AO) depth of flooding at the building site G10. Community's design flood elevation Title Title
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Property Owner's or Owner's Authorized Representative's Name Me] F Curmings City State ZIP Code
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Property Owner's or Owner's Authorized Representative's Name Me] F. Cummings Address 4445 Falkirk Bay Oxnard Signature Mel F. Cummings City Oxnard CA 93035 Telephone (805) 320–3636 Comments SECTION G - COMMUNITY INFORMATION (OPTIONAL) The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect via suthorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.) G2. A community official completed Section E for a building located in Zone A (without a FEMA-Issued or community-issued BFE) or Zone AO. G3. The following information (Items G4-G9) is provided for community floodplain management purposes. G4. Permit Number G5. Date Permit Issued O/34/2008 G6. Date Certificate Of Compliance/Occupancy Issued O/30/20/0 G7. This permit has been issued for: New Construction Substantial Improvement G8. Elevation of as-built lowest floor (including basement) of the building T48 97

			For insurance Company Use,
	ng Apt., Unit, Suite, and/or Bldg. No	.) or P.O. Route and Box No.	Policy Number
6801 WHE	FLER CANYON	RO	
City	State	ZIP Code	Company NAIC Number
SANTH PAR	uLA CA	4306O	

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."

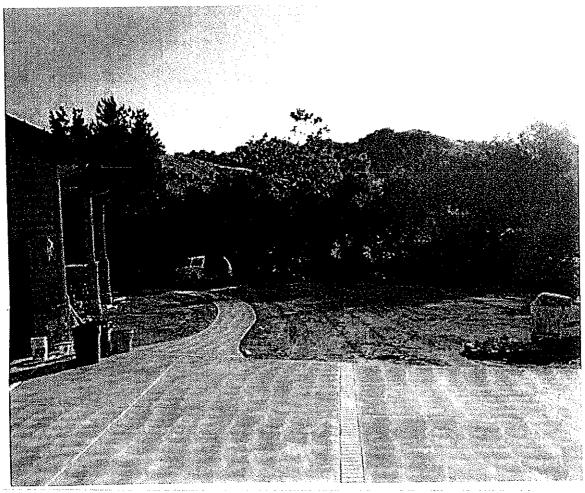




			For Insurance Company Use:
Building Street Address (including Apt., Uni	t, Suite, and/or Bldg. No	o.) or P.O. Route and Box No.	Policy.Number
6801 WITEELI	ER CAND		
City	State	ZIP Code	Company NAIC Number
SANIO PAULA	C4	93060	

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."

VEIW FRONT YARD



Building Photographs See Instructions for Item A6.

			For Insurance Company Use:
Building Street Address (including Apt., U	nit, Suite, and/or Bldg. No.) o	or P.O. Route and Box No.	Policy.Number
6801 WHEELER	CANYON RD	·	and the second s
City	State	ZIP Code	Company NAIC Number
SANTA BAULA	CA	93060	10.00000000000000000000000000000000000

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 on the reverse.

FRONT OF HOUSE



*				For Insurance Company Use:
Building Street Address	(including Apt., Unit, S	Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number
6801	WHEELE		\vee RD	
City	1	State	ZIP Code	Company NAIC Number
SANIA 1	PAULA	C 27	43060	

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."

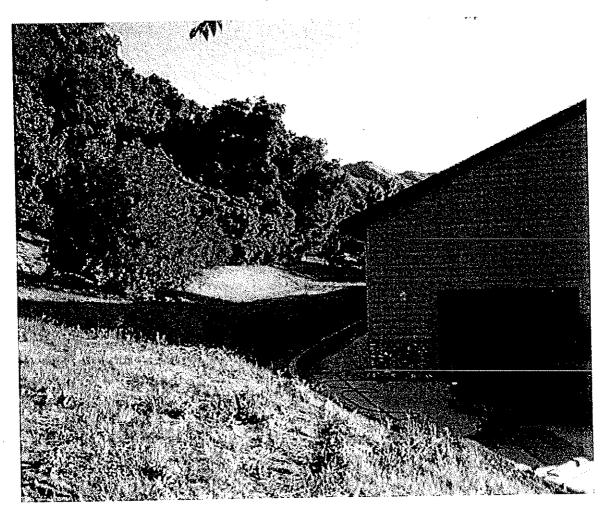
LEFT SIDE OF HOUSE



		For insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or	Bldg. No.) or P.O. Route and Box No.	Policy Number
6801 WHEELER CA		
City State	ZIP Code	Company NAIC Number
SANTA PAULA C	4 93060	

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."

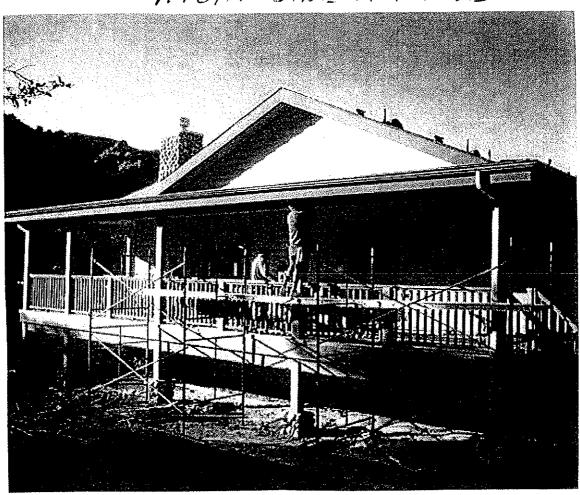
UEIW FROM LEFT SIDE



	roi insulance Company Use.
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number
6801 WHEELER CANYON RD	
City State ZIP Code	Company NAIC Number
CANTO PAULA CA 93060	STATE OF THE STATE

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."

RIGHT SIDE OF HOUSE

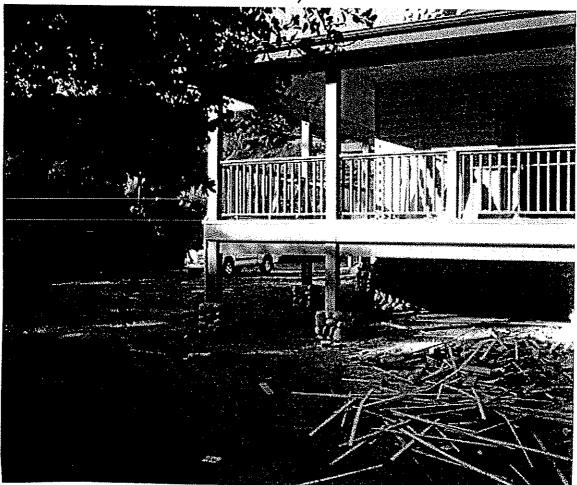


Building Photographs See Instructions for Item A6.

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number
6801 WHEELER CANYON AD	
City State ZIP Code	Company NAIC Number
SANIA PAULA CA 93060	ESCHEED PLANTS AND PROPERTY.

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 on the reverse.

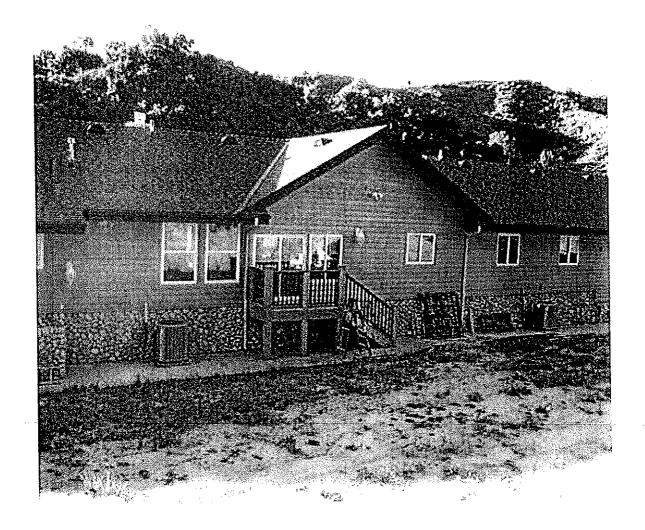
VEIW FROM RIGHT SIDE



	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number
6801 WHEFLER CANYON RD	
City State ZIP Code	Company NAIC Number
SANTA PAULA CA 93060	

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."

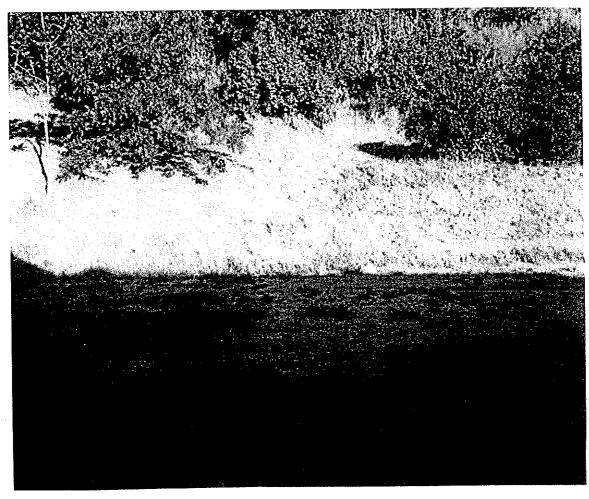
REAR OF HOUSE



	For insurance Company Ose,
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number
6801 WHEELER CANYON RD	3.34.34.34.33.33.33.33.33.33.33.33.33.33
City State ZIP Code	Company NAIC Number
SANTA PAULA CA 93060	1.02 (40) (80) (80) (80) (80) (80) (80) (80) (8

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."

VEIW REAR YARD OF HOUSE



		•			For Insurance Company Use
Building Street Address	(including Apt., Unit, S	Suite, and/or Bldg. N	o.) or P.O. Rout	e and Box No.	Policy Number
6801	WHEFLE	P CAN	VON	RD	
City -	1 .	State		ZIP Code	Company NAIC Number
SANTA	Paula	C4	93	060	

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."

WATER HEUTER IN BASEMENT

