

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077  
Expires July 31, 2002

**ELEVATION CERTIFICATE**

**EC 91**

Important: Read the instructions on pages 1 - 7.

**SECTION A - PROPERTY OWNER INFORMATION**

BUILDING OWNER'S NAME William Parks			For Insurance Company Use: Policy Number		
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 2009 South Main			Company NAIC Number		
CITY Moscow	STATE ID	ZIP CODE 83843			
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax No. 4673					
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) Non-residential, storage and shipping distribution					
LATITUDE/LONGITUDE (OPTIONAL) ( ##° - ##' - ##.###" or ##.#####") Mark RM2		HORIZONTAL DATUM: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Other: Firm Reference	

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER City of Moscow 160090		B2. COUNTY NAME Latah County		B3. STATE ID	
B4. MAP AND PANEL NUMBER 160090 0001	B5. SUFFIX C	B6. FIRM INDEX DATE May 15, 1980	B7. FIRM PANEL EFFECTIVE/REVISED DATE May 15, 1982	B8. FLOOD ZONE(S) A4	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 2546

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  
 FIS Profile  FIRM  Community Determined  Other (Describe): \_\_\_\_\_

B11. Indicate the elevation datum used for the BFE in B9:  NGVD 1929  NAVD 1988  Other (Describe): \_\_\_\_\_

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No  
Designation Date \_\_\_\_\_

**SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)**

C1. 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.

C2. Building Diagram Number 1 (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.)

C3. 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 RM2 Conversion/Comments None

Elevation reference mark used RM2 Does the elevation reference mark used appear on the FIRM?  Yes  No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>2548.98</u> ft.(m)
<input type="checkbox"/> b) Top of next higher floor	_____ ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____ ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	_____ ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>2548.98</u> ft.(m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>2546.48</u> ft.(m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	<u>2553.60</u> ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>N/A</u>
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	<u>N/A</u> sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date



**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 Thomas Moore		LICENSE NUMBER 8224	
TITLE Ruen-Yeager & Associates Moscow Office Manager		COMPANY NAME Ruen-Yeager & Associates, Inc.	
ADDRESS <u>103 North Jackson Street</u>	CITY Moscow	STATE ID	ZIP CODE 83843
SIGNATURE 	DATE January 22, 2001	TELEPHONE 208-883-3755	

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 2009 South Main			Policy Number
CITY Moscow	STATE ID	ZIP CODE 83843	Company NAIC Number

**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

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zone AO and Zone A (without BFE), complete Items E1 through E4. *If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.*

- E1. Building Diagram Number \_\_ (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.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is \_\_ ft.(m) \_\_ in.(cm)  above or  below (check one) the highest adjacent grade.
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is \_\_ ft.(m) \_\_ in.(cm) above the highest adjacent grade.
- E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

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 BFE) or Zone AO must sign here.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME			
ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPHONE	
COMMENTS			

Check here if attachments

**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.

- G1.  The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local 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	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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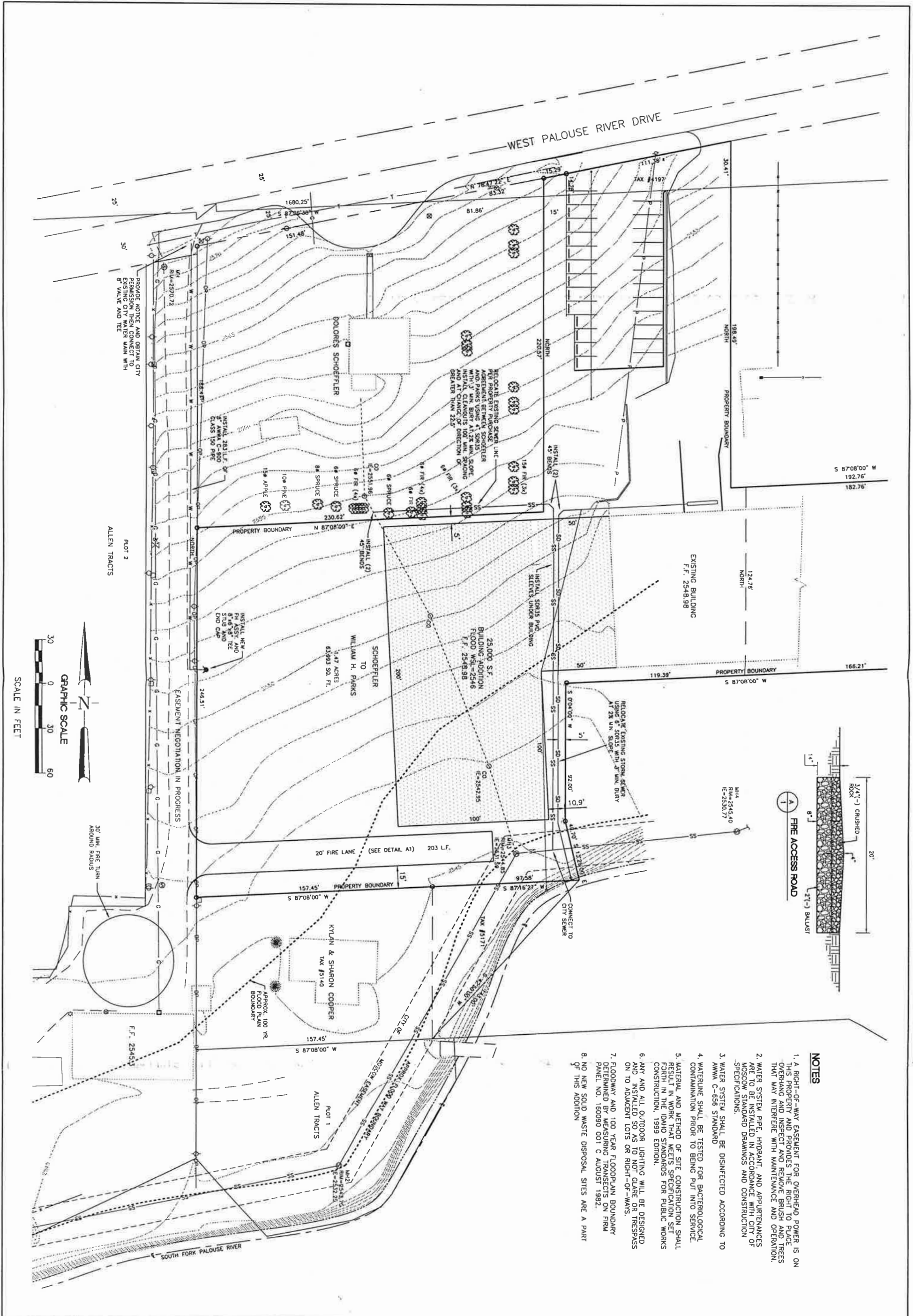
G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE
COMMENTS	

Check here if attachments



- NOTES**
1. A RIGHT-OF-WAY EASEMENT FOR OVERHEAD POWER IS ON THIS PROPERTY AND PROVIDES THE RIGHT TO PLACE OVERHANG AND INSPECT AND REMOVE BRUSH AND TREES THAT MAY INTERFERE WITH MAINTENANCE AND OPERATION.
  2. WATER SYSTEM PIPE, HYDRANT, AND APPURTENANCES ARE TO BE INSTALLED IN ACCORDANCE WITH CITY OF MOSCOW STANDARD DRAWINGS AND CONSTRUCTION SPECIFICATIONS.
  3. WATER SYSTEM SHALL BE DISINFECTED ACCORDING TO AMWA C-658 STANDARD.
  4. WATERLINE SHALL BE TESTED FOR BACTERIOLOGICAL CONTAMINATION PRIOR TO BEING PUT INTO SERVICE.
  5. MATERIAL AND METHOD OF SITE CONSTRUCTION SHALL RESULT IN WORK THAT MEETS SPECIFICATION SET FORTH IN THE IDAHO STANDARDS FOR PUBLIC WORKS CONSTRUCTION, 1999 EDITION.
  6. ANY AND ALL OUTDOOR LIGHTING WILL BE DESIGNED AND INSTALLED SO AS TO NOT GLARE OR TRESPASS ON TO ADJACENT LOTS OR RIGHT-OF-WAYS.
  7. FLOODWAY AND 100 YEAR FLOODPLAIN BOUNDARY DETERMINED BY MEASURING TRANSECTS ON FIRM PANEL NO. 160090 001 C AUGUST 1982.
  8. NO NEW SOLID WASTE DISPOSAL SITES ARE A PART OF THIS ADDITION.

PROJECT: M00602 FILE NAME: M00602 SHEET NUMBER: 1 OF 2	<b>N.W. RIVER SUPPLIES BUILDING ADD. SITE PLAN 2009 SOUTH MAIN</b>	<b>RUEN-YEAGER &amp; ASSOCIATES, INC.</b> CONSULTING ENGINEERS - LAND SURVEYORS 5685 EAST SELTICE WAY, POST FALLS, IDAHO 83854 (208)667-2464 219 PINE ST., SANDPOINT, IDAHO 83864 (208)265-4629 103 NORTH JACKSON, MOSCOW, IDAHO 83843 (208)883-3755	DESIGN BY: TJM DRAWN BY: KMT CHECKED BY: TJM PLOT DATE: 4/3/00		NO. _____ REVISION INCLUDED CITY'S COMMENTS	BY: KMT DATE: 4/3/00
			NO. _____ REVISION _____		BY: _____ DATE: _____	