

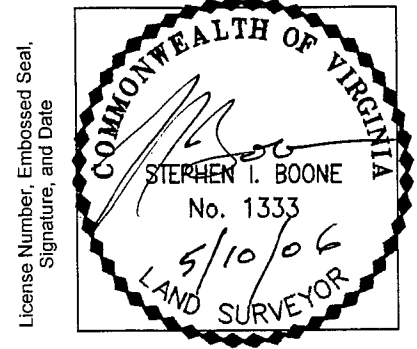
ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:	
BUILDING OWNER'S NAME KAETHE P. FERGUSON			Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 6116 POWHATAN AVENUE			Company NAIC Number	
CITY NORFOLK	STATE VA	ZIP CODE		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOTS 57 AND 58, BLOCK D, MORNINGSIDE				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL				
LATITUDE/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					
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER NORFOLK 510104		B2. COUNTY NAME INDEPENDENT CITY		B3. STATE VIRGINIA	
B4. MAP AND PANEL NUMBER 510104 0021	B5. SUFFIX D	B6. FIRM INDEX DATE 7/16/96	B7. FIRM PANEL EFFECTIVE/REVISED DATE 4/17/84	B8. FLOOD ZONE(S) A4	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 8.5
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe): _____					
B11. Indicate the elevation datum used for the BFE in B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe): _____					
B12. 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)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.	
C2. Building Diagram Number 8 (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 C3-a-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 _____ Conversion/Comments _____ Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	8.6 ft.(m)
<input type="checkbox"/> b) Top of next higher floor	11.1 ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	NA. ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	NA. ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)	10.9 ft.(m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	8.7 ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	9.0 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 C3.h <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 STEPHEN I. BOONE	LICENSE NUMBER 1333		
TITLE PRESIDENT	COMPANY NAME STEPHEN I. BOONE & ASSOCIATES P.C.		
ADDRESS 326 LONDON STREET	CITY PORTSMOUTH	STATE VA	ZIP CODE 23704
SIGNATURE 	DATE 5/10/06	TELEPHONE 757-393-6809	

REPLACES ALL PREVIOUS EDITIONS

Check here if attachments

COMMENTS

SIGNATURE

COMMUNITY NAME

TELEPHONE

DATE

LOCAL OFFICIAL'S NAME

TITLE

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)

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

G4. PERMIT NUMBER

G5. DATE PERMIT ISSUED

G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

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.

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

Check here if attachments

COMMENTS

SIGNATURE

ADDRESS

CITY

STATE

ZIP CODE

DATE

TELEPHONE

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

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.

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.

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

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 natural grade. (Use Elevation 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. Complete items C3.h and C3.i on front of form.)

E3. The top of the platform of machinery and/or equipment servicing the building is _____ ft.(m) _____ in.(cm) above or below (check one) the highest adjacent natural grade. (Use Elevation 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 natural grade, if available.)

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

Check here if attachments

COMMENTS

C3, E-A/C

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

NORFOLK

CITY

6116 POWHATAN AVENUE

BUILDING STREET ADDRESS (Including Apt, Unit, Suite, and/or B.)

OR P.O. ROUTE AND BOX NO.

STATE

VA

ZIP CODE

Company NAIC Number

Policy Number

IMPORTANT: In these spaces, copy the corresponding information from Section A