

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

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

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <b>Vickie D. Campbell</b>		FOR INSURANCE COMPANY USE	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>119 E Street SW</b>		Policy Number:	
City <b>Ephrata</b> State <b>WA</b>		Company NAIC Number:	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 2, Block 9, Harvill Second Addition to Ephrata</b>		ZIP Code <b>98823</b>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>			
A5. Latitude/Longitude: Lat. <b>47°32'07.02" N</b> Long. <b>119°55'66.01" W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> 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 <b>9</b>			
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:	
a) Square footage of crawlspace or enclosure(s) <b>1834</b> sq ft		a) Square footage of attached garage <b>907</b> sq ft	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____	
c) Total net area of flood openings in A8.b _____ sq in		c) Total net area of flood openings in A9.b _____ sq in	
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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

B1. NFIP Community Name & Community Number <b>Ephrata city of 530051</b>		B2. County Name <b>Grant</b>		B3. State <b>Washington</b>	
B4. Map/Panel Number <b>53025C0758C</b>	B5. Suffix <b>C</b>	B6. FIRM Index Date <b>02/18/2009</b>	B7. FIRM Panel Effective/Revised Date <b>02/18/2009</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1</b>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: ____/____/____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

## 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. 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. In Puerto Rico only, enter meters.

Benchmark Utilized: \_\_\_\_\_ Vertical Datum: \_\_\_\_\_

Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☐ NAVD 1988 ☒ Other/Source: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE.

	Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters

## 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 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

☐ Check here if attachments.

Certifier's Name <b>RICK N. SKINNER</b>		License Number <b>43619</b>	
Title <b>PROFESSIONAL LAND SURVEYOR</b>		Company Name <b>WESTERN PACIFIC ENGINEERING &amp; SURVEY</b>	
Address <b>1328 E. HUNTER PLACE</b>		City <b>MOSES LAKE</b>	State <b>WA.</b>
Signature		Date <b>01/31/2013</b>	ZIP Code <b>98837</b>
		Telephone <b>(509) 765-1023</b>	



# ELEVATION CERTIFICATE, page 2

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. 119 E Street SW			Policy Number:	
City Ephrata	State WA	ZIP Code 98823	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 The AC unit is located on the north side of the home, depicted in photo 'D'. Per the City of Ephrata Standard, HAG is defined as the highest elevation at property curb & LAG is defined as the lowest elevation at property curb.

Signature  Date 01/31/2013

## 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 3.6 ☒ feet ☐ meters ☒ above or ☐ below the HAG.  
b) Top of bottom floor (including basement, crawlspace, or enclosure) is 4.0 ☐ feet ☐ meters ☒ above or ☐ below the LAG.

E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is          ☐ feet ☐ meters ☒ above or ☐ below the HAG.

E3. Attached garage (top of slab) is 2.2 ☐ feet ☐ meters ☒ above or ☐ below the HAG.  
E4. Top of platform of machinery and/or equipment servicing the building is 1.8 ☐ feet ☐ meters ☒ above or ☐ below the HAG.

E5. 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. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name Rick N. Skinner, PLS (Representative) Western Pacific Engineering & Survey Inc.  
Address 1328 E Hunter Place City Moses Lake State WA ZIP Code 98837  
Signature \_\_\_\_\_ Date 01/31/2013 Telephone (509) 765-1023

Comments Washington Land Surveyor No. 43619

☐ 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. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

G1. ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is 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	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:          ☐ feet ☐ meters Datum         

G9. BFE or (in Zone AO) depth of flooding at the building site:          ☐ feet ☐ meters Datum         

G10. Community's design flood elevation:          ☐ feet ☐ meters Datum         

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

☐ Check here if attachments.

## BUILDING PHOTOGRAPHS

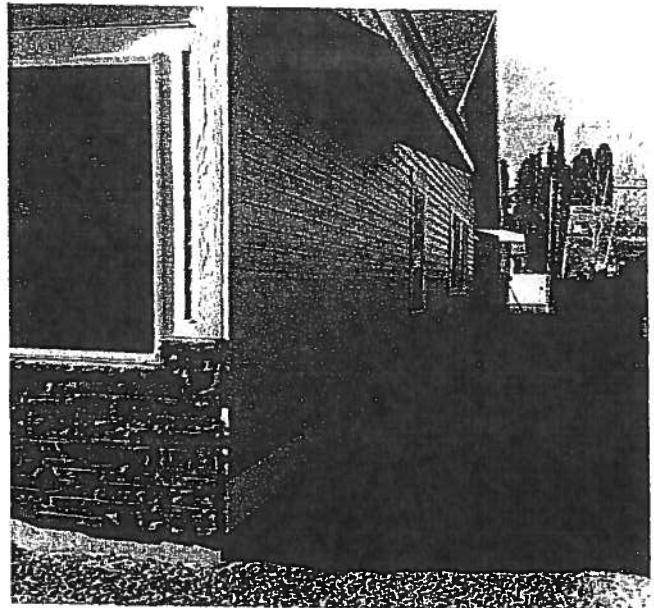
See Instructions for Item A6.

<b>IMPORTANT:</b> In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 119 E Street SW			Policy Number:
City Ephrata	State WA	ZIP Code 98823	Company NAIC Number:

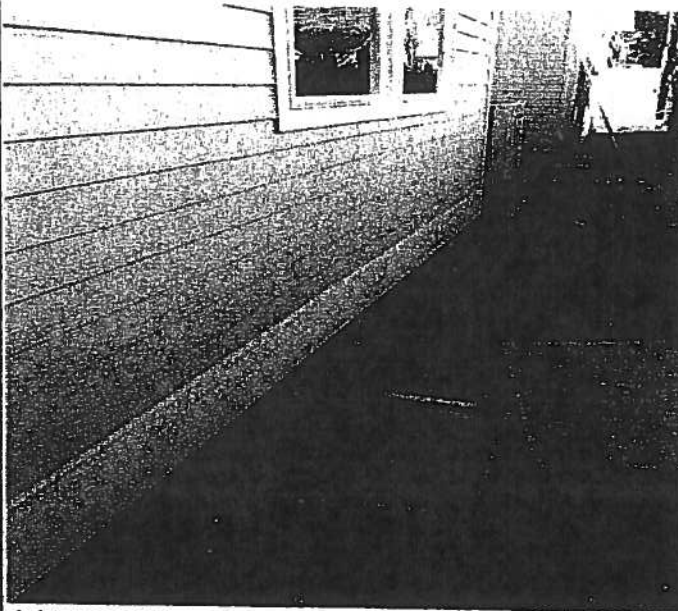
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, 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.



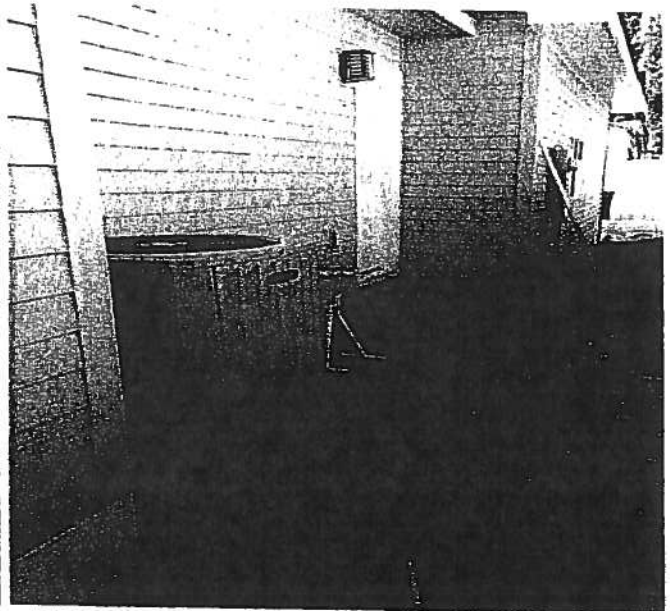
'A' FRONT &amp; EAST (1/30/2013)



'B' NORTHEAST CORNER &amp; NORTH SIDE (1/30/2013)



'C' NORTH SIDE &amp; CRAWLSPACE ACCESS (1/30/2013)

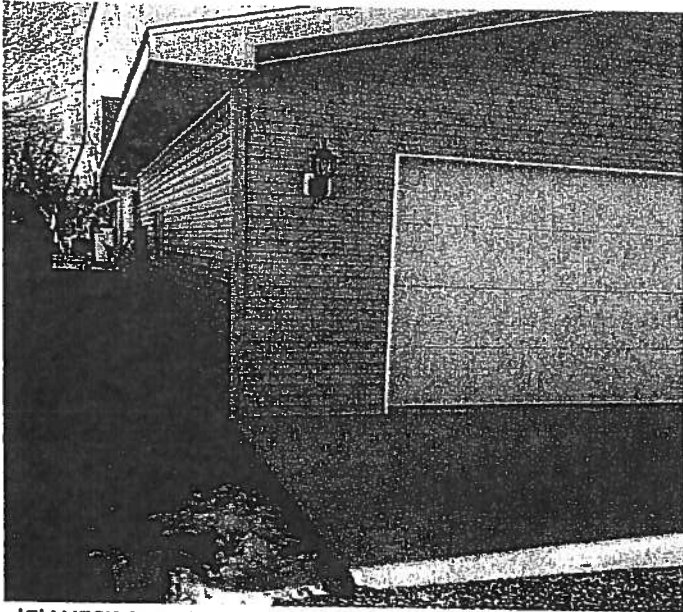


'D' NORTH SIDE &amp; AC UNIT (1/30/2013)

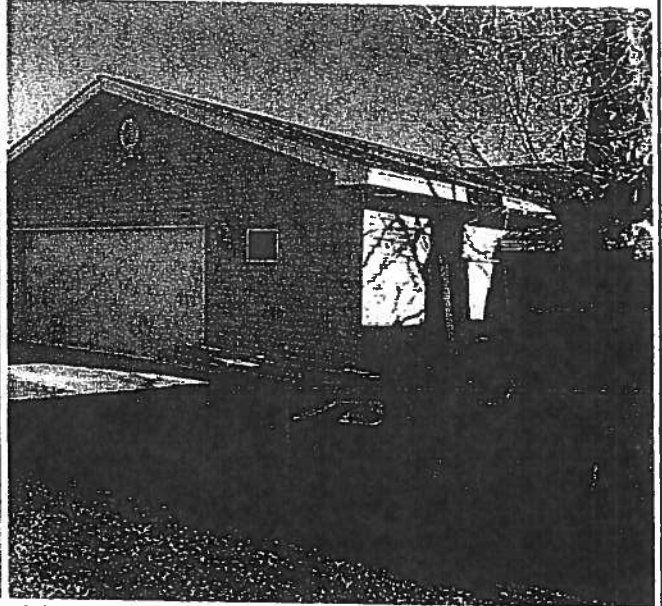
**BUILDING PHOTOGRAPHS**  
 Continuation Page

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or R.O. Route and Box No. <b>119 E Street SW</b>			Policy Number:
City <b>Ephrata</b>	State <b>WA</b>	ZIP Code <b>98823</b>	Company NAIC Number:

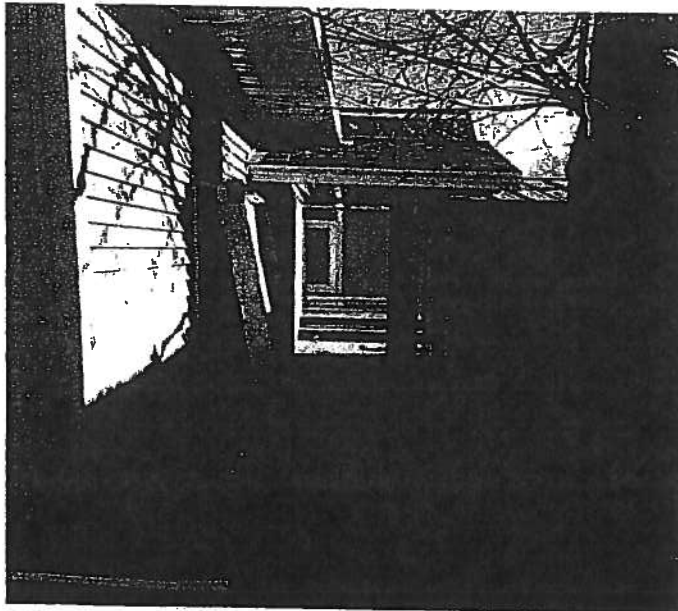
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative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



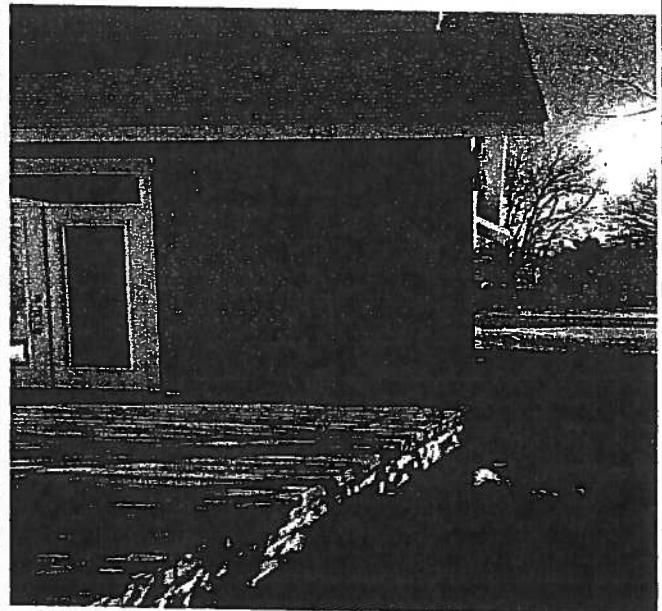
'E' WEST SIDE & NORTHWEST CORNER (1/30/2013)



'F' WEST SIDE & SOUTHWEST CORNER (1/30/2013)



'G' NORTH SIDE WALKWAY TO DECK (1/30/2013)



'H' NORTH SIDE DECK DOORS FACE WEST (1/30/2013)

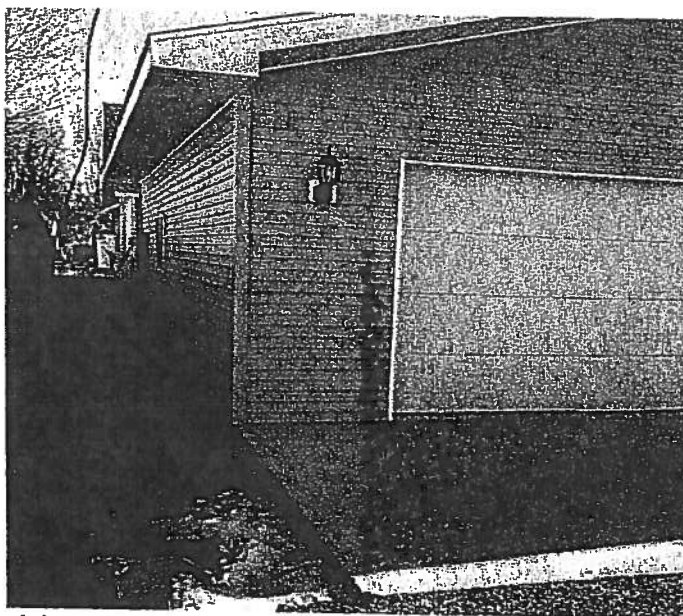


## BUILDING PHOTOGRAPHS

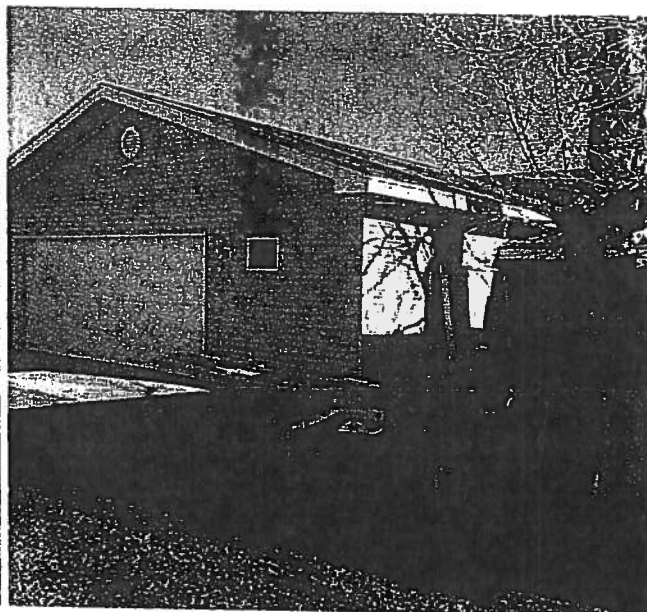
Continuation Page

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 119 E Street SW			Policy Number:
City Ephrata	State WA	ZIP Code 98823	Company NAIC Number:

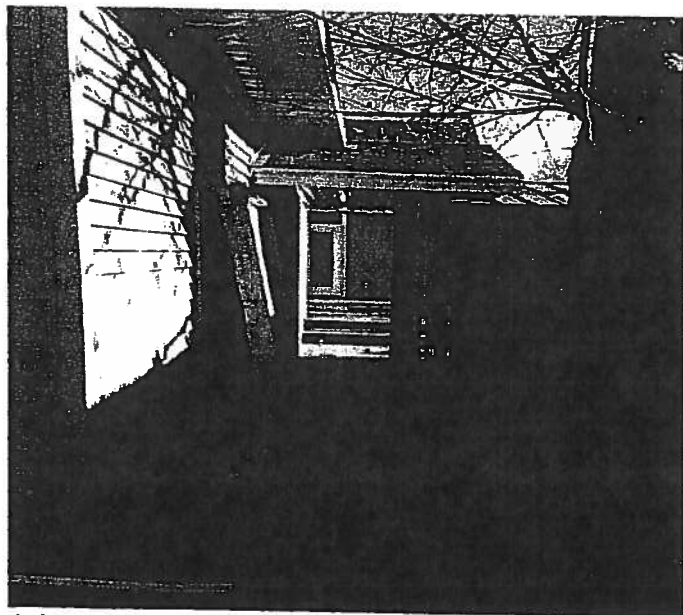
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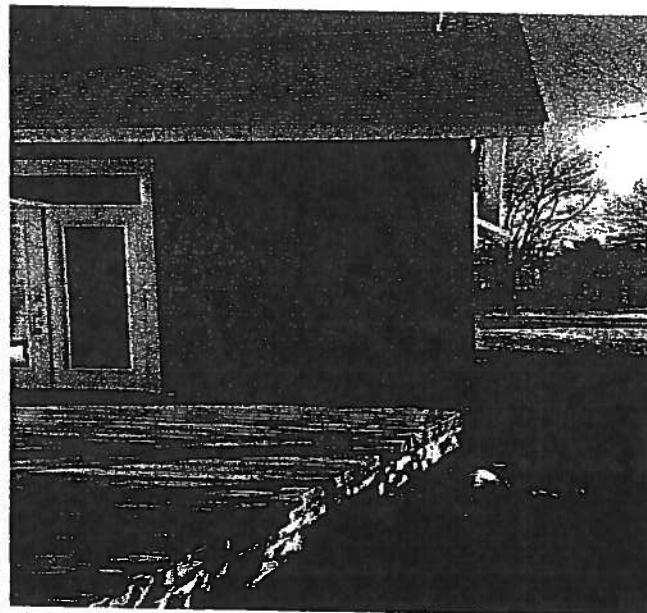
'E' WEST SIDE &amp; NORTHWEST CORNER (1/30/2013)



'F' WEST SIDE &amp; SOUTHWEST CORNER (1/30/2013)



'G' NORTH SIDE WALKWAY TO DECK (1/30/2013)



'H' NORT SIDE DECK DOORS FACE WEST (1/30/2013)

## BUILDING PHOTOGRAPHS

Continuation Page

**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.  
119 E Street SW

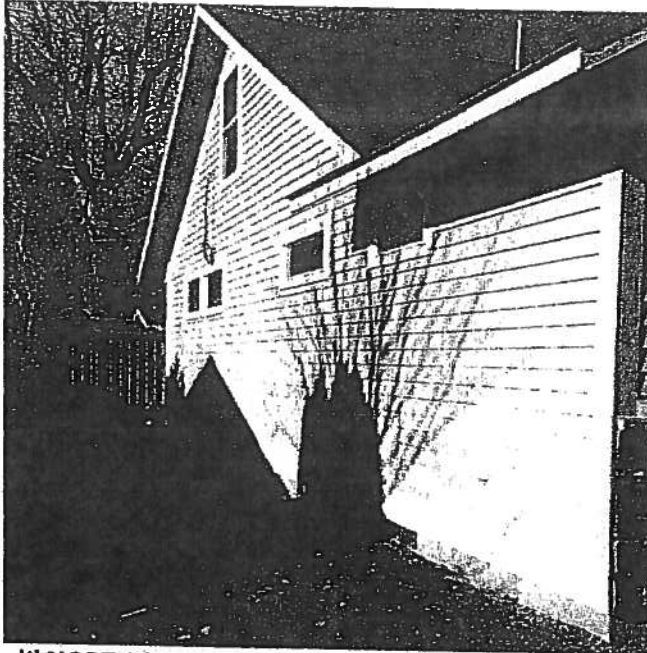
FOR INSURANCE COMPANY USE

Policy Number:

City  
EphrataState  
WAZIP Code  
98823

Company NAIC Number:

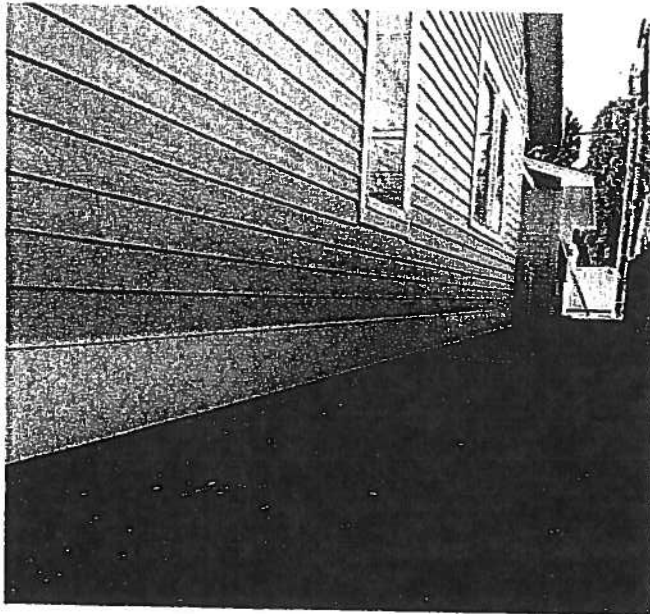
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative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



'I' NORTH SIDE HOUSE (1/30/2013)



'J' FRONT &amp; SOUTHEAST CORNER (1/30/2013)



'K' FLOOD VENTS NORTH SIDE (1/30/2013)



MAP SCALE 1" = 500'

0 250 500 1000  
FEET  
0 250 500  
METERS

PANEL 0768C

**FIRM**  
FLOOD INSURANCE RATE MAP  
GRANT COUNTY,  
WASHINGTON  
AND INCORPORATED AREAS

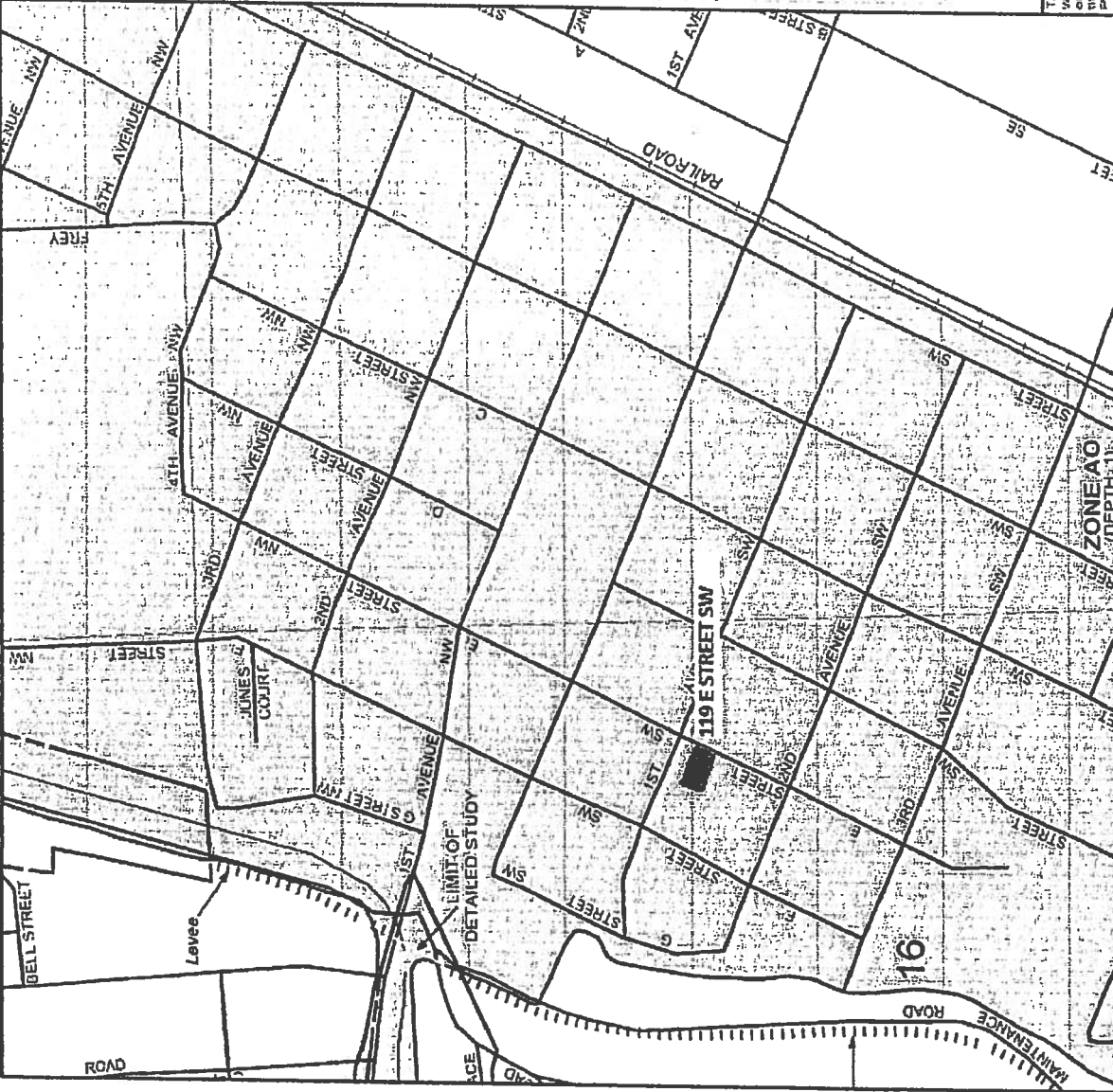
PANEL 758 OF 1950  
(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:  
NUMBER 53025  
COMMUNITY 53025  
GRANT COUNTY 53025  
FIRM'S CITY OF 53025

MAP NUMBER  
53025C0768C  
EFFECTIVE DATE  
FEBRUARY 18, 2009

Federal Emergency Management Agency

This is an official copy of a portion of the Flood Insurance Rate Map (FIRM) for Grant County, Washington, and incorporated areas. It was prepared by the Federal Emergency Management Agency (FEMA) under contract to the United States Department of Commerce. This map does not reflect changes in the flood insurance rate map which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at [www.fema.gov](http://www.fema.gov)



WHEN RECORDED RETURN TO:  
Name: Gale C. Campbell  
Address: 119 E Street Southeast  
Ephrata, WA 98823

NO REAL ESTATE EXCISE TAX PAID

AFFIDAVIT No. 200809

Date 5/6/09 By km  
DARRYL PHEASANT, Treasurer  
Grant County, Washington

Escrow Number: 83085-AS  
Filed for Record at Request of: *Stewart/Security Title Guaranty*

### QUIT CLAIM DEED

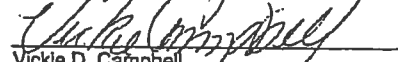
THE GRANTOR(S), Vickie D. Campbell, spouse of grantee for and in consideration of Establish Separate Property, WAC 458-61A-203 in hand paid, conveys and quit claims to Gale C. Campbell, a married man as his separate estate the following described real estate, situated in the County of Grant, State of Washington, together with all after acquired title of the grantor(s) herein:

Lot 2, Block 9, Harvill Second Addition to Ephrata, according to the plat thereof recorded in Volume 2 of Plats, page 95, records of Grant County, Washington

Abbreviated Legal: (Required if full legal not inserted above.) Lot 2, Block 9, Harvill Second Addition to Ephrata

Tax Parcel Number(s): 13-0838-000

Dated: May 1, 2009

  
Vickie D. Campbell

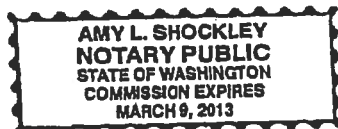
STATE OF Washington


ss.

COUNTY OF Grant

I certify that I know or have satisfactory evidence that Vickie D. Campbell is the person who appeared before me, and said person acknowledged that she signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in this instrument.

Dated: May 1, 2009.



  
Notary name printed or typed: Amy L. Shockley  
Notary Public in and for the State of Washington  
Residing at Ephrata  
My appointment expires: March 9, 2013



