

# ELEVATION CERTIFICATE

**Important:** Follow the instructions on pages 1–9.

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

SECTION A – PROPERTY INFORMATION						FOR INSURANCE COMPANY USE
A1. Building Owner's Name WASHINGTON TRUST BANK						Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 261 BASIN ST. SW						Company NAIC Number:
City EPHRATA		State Washington		ZIP Code 98823		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 9, BLOCK 16, THIRD ADD TO EPHRATA, COL. 1 PG. 13, LOTS 1-4, BLOCK 2, REARDANS FIRST ADD. VOL.1 PG 40						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>NON-RESIDENTIAL</u>						
A5. Latitude/Longitude: Lat. <u>47.318029</u> Long. <u>-119.554287</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <u>2A</u>						
A8. For a building with a crawlspace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s) <u>2,988</u> sq ft (DECOMISSIONED BASEMENT)						
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>						
c) Total net area of flood openings in A8.b <u>0</u> sq in						
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
A9. For a building with an attached garage:						
a) Square footage of attached garage _____ sq ft						
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 A9.b _____ sq in						
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 CITY OF EPHRATA 530051				B2. County Name GRANT COUNTY 530049		B3. State Washington
B4. Map/Panel Number 53025C0758C	B5. Suffix C	B6. FIRM Index Date 02-18-2009	B7. FIRM Panel Effective/ Revised Date 02-18-2009	B8. Flood Zone(s) ZONE AO	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) DEPTH 1	
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 type="checkbox"/> NGVD 1929 <input checked="" 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						

**ELEVATION CERTIFICATE**OMB No. 1660-0008  
Expiration Date: November 30, 2022

<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. 261 BASIN ST. SW			Policy Number:
City EPHRATA	State Washington	ZIP Code 98823	Company NAIC Number

**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: GPS WSRN NETWORK EPHRATA REGION Vertical Datum: NAVD 88

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.

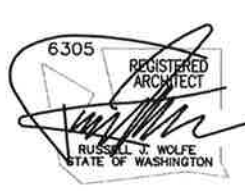
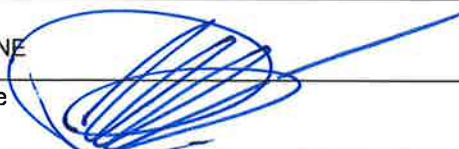
Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>1268.85</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	<u>1277.15</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>N/A</u>	<input 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)	<u>1268.85</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>1274.707</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>1276.003</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A</u>	<input 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.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No ☒ Check here if attachments.

Certifier's Name RUSSEL J. WOLFE		License Number 6305	
Title ARCHITECT			
Company Name WOLFE ARCHITECTURAL GROUP			
Address 1015 N CALISPEL ST. SUITE B			
City SPOKANE	State Washington	ZIP Code 99201	
Signature 	Date 04-18-2023	Telephone (509) 455-6999	Ext.


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

Comments (including type of equipment and location, per C2(e), if applicable)

MECHANICAL EQUIPMENT ON ROOF: DUCTLESS SPLIT SYSTEM CONDENSING UNITS (DCU), OUTDOOR UNIT (ODU), HEAT PUMP, AND AN ENERGY RECOVERY VENTILATOR (ERV). HOT WATER AND FURNACE IN EXISTING BASEMENT.

THE ELEVATIONS IN SECTION C ARE FROM THE ATTACHED SURVEY PROVIDED BY HOLT SURVEYING AND MAPPING.

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 261 BASIN ST. SW			Policy Number:	
City EPHRATA	State Washington	ZIP Code 98823	Company NAIC Number	
<b>SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)</b>				
<p>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.</p> <p>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).</p> <p>a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.</p> <p>b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the LAG.</p> <p>E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.</p> <p>E3. Attached garage (top of slab) is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.</p> <p>E4. Top of platform of machinery and/or equipment servicing the building is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.</p> <p>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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown. The local official must certify this information in Section G.</p>				
<b>SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION</b>				
<p>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.</p>				
Property Owner or Owner's Authorized Representative's Name JAKE MELVILLE    AVP, MGR WASHINGTON TRUST BANK				
Address 717 W SPRAGUE AVE	City SPOKANE	State WA	ZIP Code <input checked="" type="checkbox"/> 99201	
Signature 	Date	Telephone		
Comments THE ELEVATIONS IN SECTION C ARE FROM THE ATTACHED SURVEY PROVIDED BY HOLT SURVEYING AND MAPPING.				
<input checked="" type="checkbox"/> Check here if attachments.				

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 261 BASIN ST. SW			Policy Number:	
City EPHRATA	State Washington	ZIP Code 98823	Company NAIC Number	
<b>SECTION G – COMMUNITY INFORMATION (OPTIONAL)</b>				
<p>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.</p> <p>G1. <input type="checkbox"/> 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.)</p> <p>G2. <input type="checkbox"/> A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.</p> <p>G3. <input type="checkbox"/> The following information (Items G4–G10) is provided for community floodplain management purposes.</p>				
G4. Permit Number		G5. Date Permit Issued		G6. Date Certificate of Compliance/Occupancy Issued
<p>G7. This permit has been issued for:      <input type="checkbox"/> New Construction    <input type="checkbox"/> Substantial Improvement</p> <p>G8. Elevation of as-built lowest floor (including basement) of the building: _____ <input type="checkbox"/> feet    <input type="checkbox"/> meters    Datum _____</p> <p>G9. BFE or (in Zone AO) depth of flooding at the building site: _____ <input type="checkbox"/> feet    <input type="checkbox"/> meters    Datum _____</p> <p>G10. Community's design flood elevation: _____ <input type="checkbox"/> feet    <input type="checkbox"/> meters    Datum _____</p>				
Local Official's Name			Title	
Community Name			Telephone	
Signature			Date	
<p>Comments (including type of equipment and location, per C2(e), if applicable)</p> <div style="text-align: right; margin-top: 10px;"><input type="checkbox"/> Check here if attachments.</div>				

# BUILDING PHOTOGRAPHS

## ELEVATION CERTIFICATE

See Instructions for Item A6.

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City EPHRATA	State Washington	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.



Photo One

Photo One Caption FRONT VIEW

Clear Photo One



Photo Two

Photo Two Caption REAR VIEW

Clear Photo Two



**ELEVATION CERTIFICATE****BUILDING PHOTOGRAPHS**

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

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City EPHRATA	State Washington	ZIP 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.



Photo Three

Photo Three Caption RIGHT SIDE VIEW

Clear Photo Three

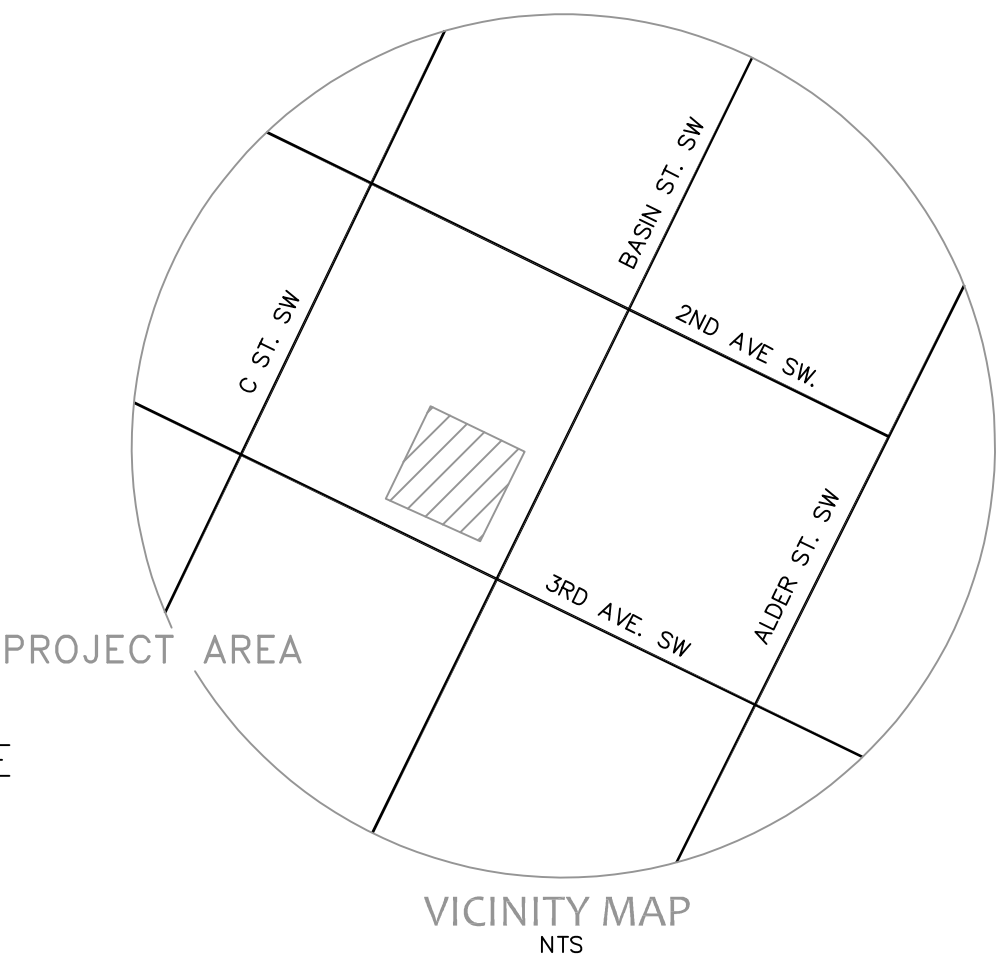
Photo Four

Photo Four

Photo Four Caption

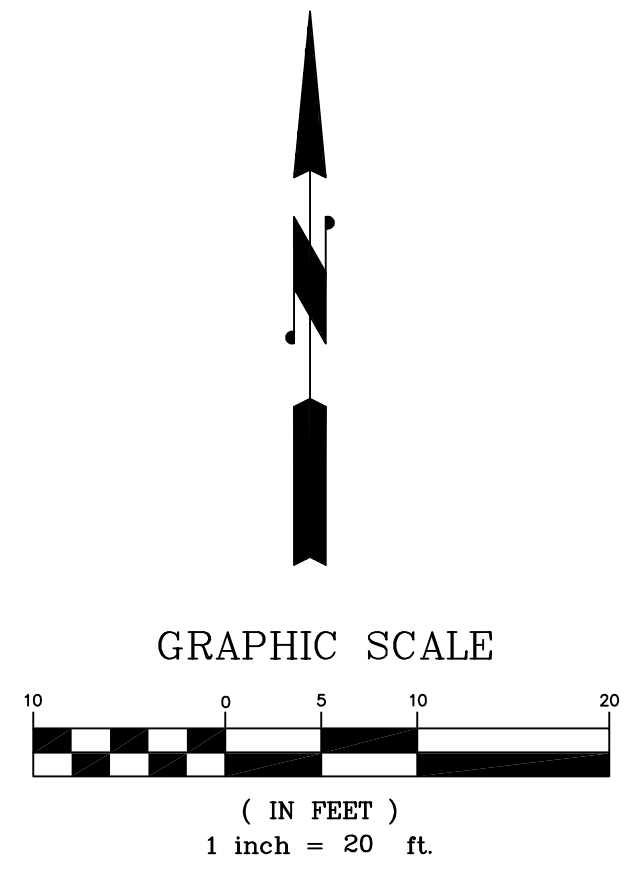
Clear Photo Four

TOPOGRAPHIC SURVEY  
AMERICAN WEST BANK  
LOT 9, BLOCK 16 AND LOTS 1-4, BLOCK 2  
LOCATED IN THE SW 1/4 OF THE NW 1/4 AND  
THE NW 1/4 OF THE SW 1/4  
S. 15, T. 21 N., R. 26 E., W.M.  
EHRATA, GRANT COUNTY, WA.

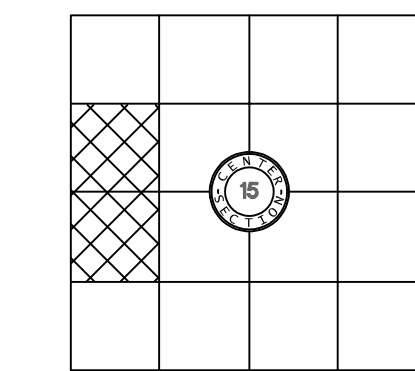


LEGEND

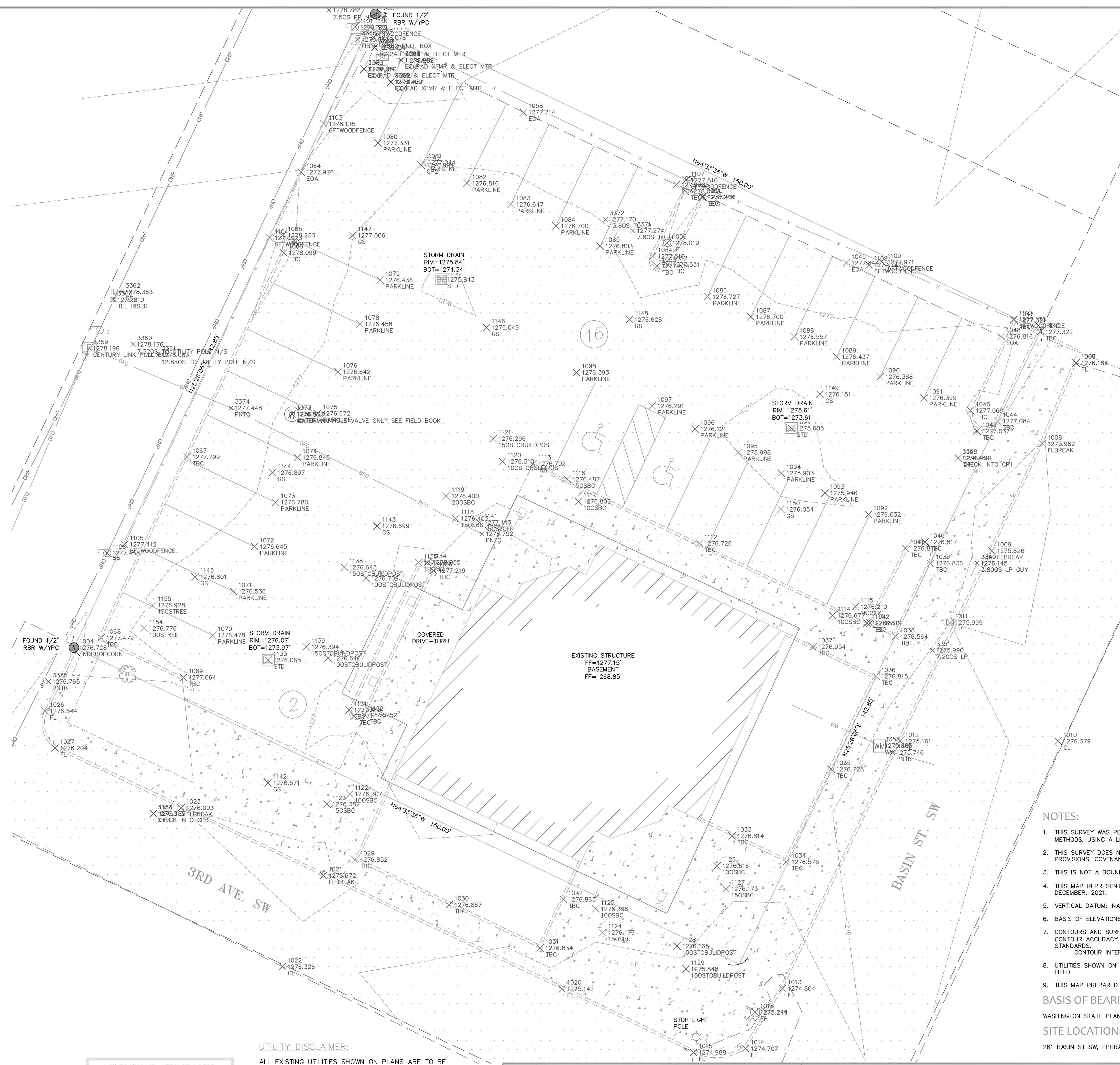
- ASPHALT SURFACING
- CURB
- SIDEWALK OR CONCRETE
- TRANSFORMER
- TREE (DECIDUOUS)
- WATER MANHOLE
- FOUND POINT AS NOTED
- LIGHT POLE
- FIRE HYDRANT
- CATCH BASIN
- POWER POLE
- SANITARY SEWER MANHOLE
- WATER METER
- GUY ANCHOR
- ELECTRICAL METER
- PHONE RISER
- UTILITY VAULT
- FIBER OPTIC LINE
- WATER LINE
- HANDICAP PARKING
- BUILDING LINE



- NOTES:
- THIS SURVEY WAS PERFORMED IN DECEMBER, 2021 BY STANDARD FIELD TRAVERSE METHODS, USING A LEICA GS12, (GPS GNSS RECEIVER).
  - THIS SURVEY DOES NOT PURPORT TO SHOW ALL EASEMENTS, RESTRICTIONS, RESERVATIONS, PROVISIONS, COVENANTS OR CONDITIONS WHICH MAY AFFECT THE LAND SHOWN HEREON.
  - THIS IS NOT A BOUNDARY SURVEY.
  - THIS MAP REPRESENTS THE EXISTING CONDITIONS AS FOUND ON THE DATE(S) OF SURVEY; DECEMBER, 2021.
  - VERTICAL DATUM: NAVD 88
  - BASIS OF ELEVATIONS: GPS WSRN NETWORK EPHRATA REGION
  - CONTOURS AND SURFACE FEATURES ARE DERIVED FROM DIRECT FIELD OBSERVATIONS. CONTOUR ACCURACY 1/2 CONTOUR INTERVAL AS PER NATIONAL MAP ACCURACY STANDARDS. CONTOUR INTERVAL: 1 FOOT
  - UTILITIES SHOWN ON MAP ARE FROM UTILITY COMPANY LOCATES AND OBSERVATIONS IN THE FIELD.
  - THIS MAP PREPARED FOR SITE IMPROVEMENTS
- BASIS OF BEARINGS:  
WASHINGTON STATE PLANE NORTH
- SITE LOCATION:  
261 BASIN ST SW, EPHRATA, WA 98823



SEC. 15, TWP. 21, RGE. 26, W.M.



UTILITY DISCLAIMER:

ALL EXISTING UTILITIES SHOWN ON PLANS ARE TO BE VERIFIED HORIZONTALLY AND VERTICALLY PRIOR TO ANY CONSTRUCTION. ALL EXISTING FEATURES INCLUDING BURIED UTILITIES ARE SHOWN AS INDICATED ON RECORD MAPS AND SURVEYS FURNISHED BY OTHERS. WE ASSUME NO LIABILITY FOR THE ACCURACY OF THOSE RECORDS AND SURVEYS, FOR THE FINAL LOCATION OF EXISTING UTILITIES IN AREAS CRITICAL TO CONSTRUCTION CONTACT THE UTILITY OWNER/AGENCY.

UNDERGROUND SERVICE ALERT  
ONE-CALL NUMBER  
**811**  
CALL TWO BUSINESS DAYS  
BEFORE YOU DIG

**HOLT SURVEYING AND MAPPING, INC.**  
PROFESSIONAL LAND SURVEY SERVICES  
TAPIO OFFICE CENTER, 104 S. FREYA BLUE FLAG BUILDING  
SUITE 104A, SPOKANE, WA 99202  
(509) 222-0468 richholtssurveying@gmail.com

PROJECT  
**TOPOGRAPHIC SURVEY  
AMERICAN WEST BANK**  
LOT 9, BLOCK 16 AND LOTS 1-4, BLOCK 2  
LOCATED IN THE SW 1/4 OF THE NW 1/4 AND THE NW 1/4 OF THE SW 1/4  
S. 15, T. 21 N., R. 26 E., W.M. EHRATA, GRANT COUNTY, WA.

SCALE: 1"=10'  
DRAWN BY: AAC  
CHECKED BY: R. HOLT  
FIELD BOOK:  
DATE: 01/13/22

SHEET DESCRIPTION  
**EXISTING SITE CONDITIONS**

JOB NO.  
21-097  
DRAWING NO.  
21-097.DWG  
SHEET  
1 OF 1