## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077 Expires December 31, 2005

Important: Read the instructions on pages 1-7.

	For Insurance Company Use:								
	Policy Number								
10385 Ute Pass Avlenue	RESS (Including /	Apt., Unit, Suite, and/or B	ldg. No.) OR P.O. ROUTE AND						
CITY Green Mountain Falls			STATE CO						
El Paso County Assessors Parcel No. 830840-10-064, Part of N1/2, SE1/4 SEction 8, T.13S., R.68W. of the 6th P.M.									
Redidential									
				SOURCE: GPS (Type): Other: Other:					
Steve and Stacy Megyeri  BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.  10385 Ute Pass Avienue  COTY Green Mountain Falls CO 80819  PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) El Paso County Assessors Parcel No. 830840-10-064, Part of N1/2, SE1/4 SEction 8, T.13S., R.68W. of the 6 <sup>th</sup> P.M.  BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Redidential  LATITUDE/LONGITUDE (OPTIONAL) (##" - ##" - ## ###" or ## #####") NAD 1927 NAD 1983 NUSGS Quad Map Other:  SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Green Mountain Falls, Colorado, 080062  B4. MAP AND PANEL NUMBER B5. SUFFIX B6. FIRM INDEX DATE B7. FIRM PANEL B8. FLOOD ZONE(S) Colorado Community Determined Community Determined Community Other (Describe):									
					The state of the s				
NUMBER 08041C0467	F	3-17-97	EFFECTIVE/REVISED DATE 8-23-99	. , , ,	(Zone AO, use depth of flooding)				
☐ 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					Designation Date				
-			0						
	- ,	•	ne building for which this certificate	is being completed - see p	pages 6 and 7. If no diagram				
			EE) AD ADIA ADIAE ADIA4 AO	O ADIALI ADIAO					
				culation. Use the space pr	ovided or the Comments area of				
		currient the datum conversion	NI.						
		e elevation reference mort :	ised annear on the FIRM2 🔲 V	ps XI No	- AREKARKAKANANA				
				2	INTER E. Winds				
				. 33 IL(III)					
, ,				#(w) 8 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
		anioci (v zurico urily)		bos:	9853 \ 3				
	o u) Attached garage (top of siab)  7/08. 28 TL(M)								
	ber, ure,	10/2 0/03							
of Lowest adjacent (finished) grade (LAG)  7707 9 ft (m)									
, , ,	,			Se S	TOP COLOSS				
				icen	HARRING AND THE STATE OF THE ST				
	(27)		T						
o ij rota area or an perm				T CERTIFICATION					
This certification is to be si					formation				
TITLEConsulting Egineer			COMPANY NAME	Oliver E. Watts, Consulting	g Engineer, Inc				
ADDRESS	1	*	CITY	STATE					
614 Elkton Drive	- A1	2	Colorado Springs	CO	80907				
SIGNATURE	Dut		DATE 3-10-05		PHONE 593-0173				
0	1 200								

	y the corresponding information from			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., 10385 Ute Pass Avenue	Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND	BOX NO.		Policy Number
CITY Green Mountain Falls	STAT CO	E	ZIP CODE 80819	Company NAIC Number
	ION D - SURVEYOR, ENGINEER, OR A	RCHITECT CERTIFICATI		
	e for (1) community official, (2) insurance agent/			
COMMENTS				
	gional Flood Plain Administrator at the time of b			
prepared by the owner, and based on the F	Flood Plain Study for the Hardie - Bandy Proper	rty (the same property) dated (	October	
14.1999, Prepared by Oliver E. Watts, Con-	sulting Engineer, Inc., Colorado Springs.			
Flood Elevation at garage is 7706.5, where				Check here if attachments
SECTION E - BUILDING E	LEVATION INFORMATION (SURVEY N	OT REQUIRED) FOR ZO	NE AO AND ZON	E A (WITHOUT BFE)
	plete Items E1 through E4. If the Elevation Ce	ertificate is intended for use as	supporting information	n for a LOMA or LOMR-F,
represents the building, provide a sketch				,
natural grade, if available).	ement or enclosure) of the building isft.(m			
grade. Complete items C3.h and C3.i or	(see page 7), the next higher floor or elevated in front of form.	noor (elevation b) of the building	ig isir.(m)in.(	orn) above the nighest adjacent
E4. The top of the platform of machinery and/ natural grade, if available).	or equipment servicing the building isft.(m	) <u>3</u> in.(cm) ☐ above or ☐ b	elow (check one) the	e highest adjacent grade. (Use
	ber is available, is the top of the bottom floor ele	evated in accordance with the	community's floodpla	in management ordinance?
Yes No Unknown. The k	ocal official must certify this information in Secti	on G.		
SECTI	ON F - PROPERTY OWNER (OR OWNE	ER'S REPRESENTATIVE	CERTIFICATION	
	epresentative who completes Sections A, B, C The statements in Sections A, B, C, and E are c			out a FEMA-issued or community-
PROPERTY OWNER'S OR OWNER'S AU Steve and Stacy Megyeri	THORIZED REPRESENTATIVE'S NAME			
ADDRESS		CITY	STATE	ZIP CODE
10385 Ute Pass Avenue SIGNATURE		Green Mountain Falls DATE	CO TELEPI	80819 HONE
SIGNATURE		DATE	(719) 68	
COMMENTS				
				☐ Check here if attachments
	SECTION G - COMMUNITY IN	FORMATION (OPTIONAL	_)	
	rdinance to administer the community's floodpl	ain management ordinance ca	an complete Sections	A, B, C (or E), and G of this Elevati
or local law to certify elevation inform G2. A community official completed Section	nd sign below. en from other documentation that has been sig lation. (Indicate the source and date of the elev on E for a building located in Zone A (without a 69) is provided for community floodplain manag	vation data in the Comments a FEMA-issued or community-is	rea below.)	
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		TIFICATE OF COMPL	ANCE/OCCUPANCY ISSUED
67. This permit has been issued for:  New 68. Elevation of as-built lowest floor (including 69. BFE or (in Zone AO) depth of flooding at the flooding at th	, ,		ft.(m) ft.(m)	Datum: Datum:
LOCAL OFFICIAL'S NAME		TITLE		*
COMMUNITY NAME	9	TELEPHONE		
SIGNATURE		DATE		
COMMENTS	3			3
	3 9			
				Check here if attachments