ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

-											< - >				< - >	
Con	sanen lle v	of this I	Flovation	Cortificato	nd all	lattachment	e for (1)	community	official	(2)	incurance ac	vent/company	and	(3)	building owner.
υup					ina an		3 101 (1,1	COMMINIA	Unicial,	(4)	insurance ac		, and	(0)	building owner.

		ION A – PROPERTY I					RANCE COMPANY USE		
A1. Building Owner's Name Policy Number:									
Nicole St. Clair									
A2. Building Street Box No. 1445 W Main Stree		luding Apt., Unit, Suite	, and/o	r Bldg. No.) or P.O.	Route and	Company N	IAIC Number:		
City				State	Ļ	ZIP Code			
Cottage Grove				Oregon		97424			
A3. Property Desci 20-03-29-44 TL260	•	d Block Numbers, Tax	Parcel	Number, Legal De	scription, etc.)				
A4. Building Use (e	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential								
A5. Latitude/Longit	ude: Lat. 43	.79734 L	_ong1	23.07249	Horizontal Datur	n: 🗌 NAD '	1927 🛛 NAD 1983		
A6. Attach at least	2 photograph	is of the building if the	Certific	ate is being used to	obtain flood insur	ance.			
A7. Building Diagra	m Number	9							
A8. For a building v	with a crawlsp	ace or enclosure(s):							
a) Square foot	age of crawls	pace or enclosure(s)		1,320 sq ft					
b) Number of p	permanent flo	od openings in the cra	wlspac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade 5		
c) Total net are	ea of flood op	enings in A8.b1,28	30 s	q in					
d) Engineered	flood opening	gs? 🗌 Yes 🗵 No)						
A9. For a building v	vith an attach	ed garage:							
a) Square footage of attached garage 0 sq ft									
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0									
c) Total net are	c) Total net area of flood openings in A9.b 0 sq in								
d) Engineered	flood opening	gs? 🗌 Yes 🖂 No	C	-					
	SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Communi		ommunity Number		B2. County Name			B3. State		
City of Cottage Gro	ve 410120			Lane			Oregon		
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E1	IRM Panel ffective/ evised Date	B8. Flood Zone(s	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)		
41039C2087	F	06/02/1999		/1999	AE	645.6'			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:									
B11. Indicate eleva	B11. Indicate elevation datum used for BFE in Item B9: 🛛 NGVD 1929 🗌 NAVD 1988 🔲 Other/Source:								
B12. Is the building	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🖂 No								
Designation D	Designation Date:								
			-			,			

ELEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: November 30, 2018
IMPORTANT: In these spaces, copy the correspondir	ng information from Sec	tion A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/ 1445 W Main Street	or Bldg. No.) or P.O. Rout	te and Box No.	Policy Number:
	tate ZIP (regon 9742		Company NAIC Number
SECTION C – BUILDING E	LEVATION INFORMAT	ION (SURVEY RI	EQUIRED)
 C1. Building elevations are based on: □ Construct *A new Elevation Certificate will be required when C2. Elevations – Zones A1–A30, AE, AH, A (with BFE Complete Items C2.a–h below according to the build Benchmark Utilized: <u>RM 382</u> Indicate elevation datum used for the elevations in ⊠ NGVD 1929 □ NAVD 1988 □ Other Datum used for building elevations must be the satisfied and the properties of the next higher floor c) Bottom of the lowest horizontal structural members 	tion Drawings* Build construction of the buildir), VE, V1–V30, V (with BF illding diagram specified in Vertical Datum: items a) through h) below r/Source: me as that used for the B space, or enclosure floor)	ling Under Constru- ng is complete. FE), AR, AR/A, AR/ n Item A7. In Puert NGVD29 v. FE. 643. 8 646. 0 N/A.	AE, AR/A1–A30, AR/AH, AR/AO. o Rico only, enter meters. Check the measurement used. X feet ☐ meters X feet ☐ meters X feet ☐ meters X feet ☐ meters
d) Attached garage (top of slab)		<u> </u>	X feet meters
 e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Co 		<u> </u>	X feet meters
f) Lowest adjacent (finished) grade next to buildir	ng (LAG)	<u> </u>	X feet meters
g) Highest adjacent (finished) grade next to buildi	ng (HAG)	<u> </u>	x feet meters
 h) Lowest adjacent grade at lowest elevation of d structural support 	eck or stairs, including	<u> </u>	X feet meters
SECTION D – SURVEYO	R, ENGINEER, OR ARC	HITECT CERTIF	ICATION
This certification is to be signed and sealed by a land s I certify that the information on this Certificate represen- statement may be punishable by fine or imprisonment Were latitude and longitude in Section A provided by a	nts my best efforts to inter under 18 U.S. Code, Sect	pret the data availation 1001.	/ law to certify elevation information. able. I understand that any false
Certifier's Name	License Number		
Ryan M. Erickson Title Professional Surveyor	LS55524		REGISTERED PROFESSIONAL LAND SURVEYOR
Company Name EGR & Associates, Inc.			DIGITALLY SIGNED
Address 2535 B Prairie Road			OREGON JANUARY 14, 2003 RYAN M. ERICKSON
City Eugene	State Oregon	ZIP Code 97402	55524 EXPIRES: 12/31/2019
Signature Myan Elucation	Date 12/10/2018	Telephone (541) 688-8322	-
Copy all pages of this Elevation Certificate and all attachr	nents for (1) community off	icial, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location, p Building Addition Elevations as follows: Finished Floor (C2b) = 647.7' (NGVD'29)	er C2(e), if applicable)		

OMB No.	1660-0008
Expiratior	Date: November 30, 2018

IMPORTANT: In these spaces, copy the correspon		FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, a 1445 W Main Street	Policy Number:							
City Cottage Grove	State Oregon	ZIP Code 97424		Company NAIC	Number			
SECTION E – BUILDING E		DRMATION (SURVE	EY NOT I E)	REQUIRED)				
For Zones AO and A (without BFE), complete Items E complete Sections A, B,and C. For Items E1–E4, use enter meters.	E1–E5. If the Certi	ficate is intended to si	upport a					
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		X feet	meters	above or	igtarrow below the HAG.			
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 		X feet	meters	above or	igtarrow below the LAG.			
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in the diagrams) of the building is	openings provide		8 and/or 9		2 of Instructions), $\boxed{\times}$ below the HAG.			
E3. Attached garage (top of slab) is	· _	× feet	meters	above or	$\stackrel{-}{ imes}$ below the HAG.			
E4. Top of platform of machinery and/or equipment servicing the building is		X feet	meters	above or	$\overline{\times}$ below the HAG.			
E5. Zone AO only: If no flood depth number is availa floodplain management ordinance?			ed in acc	ordance with th	e community's			
SECTION F – PROPERTY OV	WNER (OR OWNE	ER'S REPRESENTAT	ΓIVE) CE	RTIFICATION				
The property owner or owner's authorized representa community-issued BFE) or Zone AO must sign here.	tive who complete The statements in	es Sections A, B, and Sections A, B, and E	E for Zor	ne A (without a l ect to the best c	EMA-issued or feature for the feature of the featur			
Property Owner or Owner's Authorized Representativ Ryan M. Erickson, PLS	ve's Name							
Address 2535 Prairie Rd.		City Eugene	Sta	te egon	ZIP Code 97402			
Signature		Date	Tel	ephone	51402			
		07/23/2018	(54	1) 688-8322				
Comments				Check I	nere if attachments.			

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE							
Building Street Address (including Apt., Unit, S	Policy Number:							
1445 W Main Street								
City	State	ZIP Code		Company NAIC Number				
Cottage Grove	Oregon	97424						
SECTIO	DN G – COMMUNITY	INFORMATION (OPTIO	NAL)					
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 Sect or Zone AO.	ion E for a building loc	cated in Zone A (without a	a FEMA	N-issued or community-issued BFE)				
G3. The following information (Items G4-	-G10) is provided for c	community floodplain mar	nageme	ent purposes.				
G4. Permit Number	G5. Date Permit Iss	sued	G6. D C	ate Certificate of ompliance/Occupancy Issued				
G7. This permit has been issued for:] New Construction [Substantial Improveme	ent					
G8. Elevation of as-built lowest floor (including of the building:	g basement)	[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 (including type of equipment and lo	cation, per C2(e), if ap	oplicable)						
		. ,						
				Check here if attachments.				

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Ap 1445 W Main Street	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Cottage Grove	Oregon	97424	

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 Caption

Front View - July 26, 2018

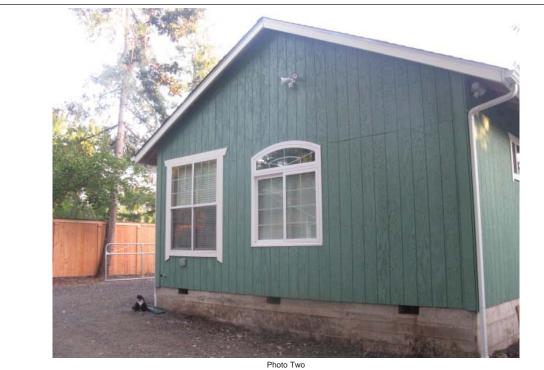


Photo Two Caption

Rear View w/ Addition - Aug 05, 2019

Replaces all previous editions.

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including A 1445 W Main Street	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Cottage Grove	Oregon	97424	

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.

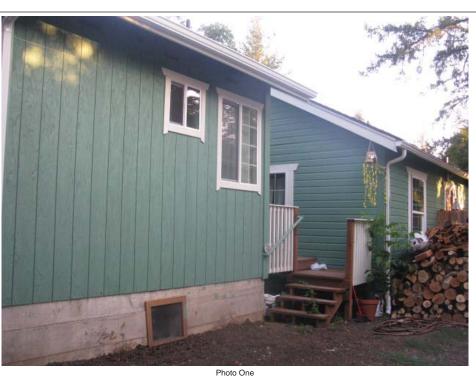


Photo One Caption

Left Side View w/ Addition - Aug 05, 2019



Photo Two Caption

Right Side View w/ Addition- Aug 05, 2019

Replaces all previous editions.