

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

| | | | |
|---|--|--|--|
| BUILDING OWNER'S NAME JEFFREY AND SUSAN JOHNSON | | For Insurance Company Use: Policy Number | |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1931 WOODBURN STREET | | Company NAIC Number | |
| CITY COLORADO SPRINGS | STATE CO | ZIP CODE 80906 | |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL NUMBER = 64302-17-033 LEGAL DESCRIPTION = SEE ATTACHED | | | |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section 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 CITY OF COLORADO SPRINGS, COLORADO 080060 | | B2. COUNTY NAME EL PASO | | B3. STATE COLORADO | |
| B4. MAP AND PANEL NUMBER 08041 | B5. SUFFIX F | B6. FIRM INDEX DATE 3/17/1997 | B7. FIRM PANEL EFFECTIVE/REVISED DATE 3/17/1997 | B8. FLOOD ZONE(S) X | B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 5967 |

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.

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 Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
Designation Date _____

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. Building Diagram Number 2 (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 C3a-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 **BM44** Does the elevation reference mark used appear on the FIRM? Yes No

a) Top of bottom floor (including basement or enclosure) 5965.3 ft.(m)

b) Top of next higher floor _____ ft.(m)

c) Bottom of lowest horizontal structural member (V zones only) _____ ft.(m)

d) Attached garage (top of slab) _____ ft.(m)

e) Lowest elevation of machinery and/or equipment servicing the building _____ ft.(m)

f) Lowest adjacent grade (LAG) 5962.9 ft.(m)

g) Highest adjacent grade (HAG) 5965.1 ft.(m)

h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 5

i) Total area of all permanent openings (flood vents) in C3h 9285 sq. in. (sq. cm)

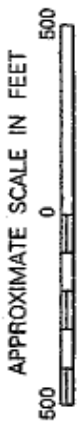
License Number, Embossed Seal, Signature, and Date



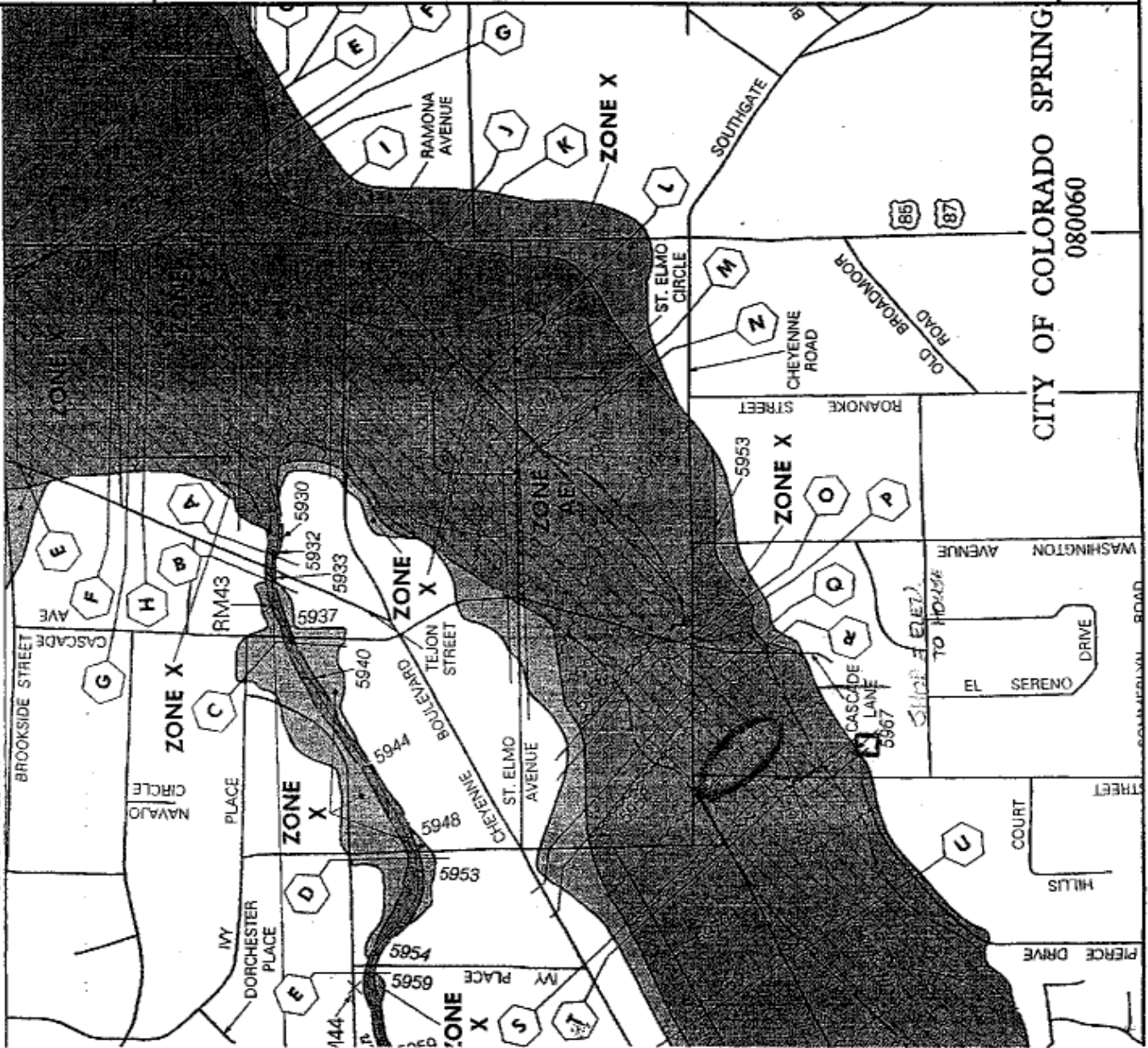
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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 CHRISTOPHER L. THOMPSON | | LICENSE NUMBER 19625 | |
| TITLE PRESIDENT | COMPANY NAME ROCKY MOUNTAIN LAND SERVICES | | |
| ADDRESS 1623 S. TEJON STREET | CITY COLORADO SPRINGS | STATE CO | ZIP CODE 80906 |
| SIGNATURE | DATE 11/21/02 | TELEPHONE 719-830-0559 | |



JOINS PANEL 0729



NATIONAL FLOOD INSURANCE PROGRAM

FIRM
FLOOD INSURANCE RATE MAP

EL PASO COUNTY,
 COLORADO AND
 INCORPORATED AREAS


PANEL 737 OF 1300
 (SEE MAP INDEX FOR PANELS NOT PRINTED)

CONTAINS:
 COMMUNITY

COLORADO SPRING, CITY OF 08006 0737 F

MAP NUMBER
 0804100737 F

EFFECTIVE DATE:
 MARCH 17, 1997



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments 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.msc.fema.gov