

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

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

SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name	Carlos E. Espinoza		Policy Number:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	100 S. Park Street		Company NAIC Number:		
City	Bonner Springs	State	KS	ZIP Code	66012
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	Lot 1, Spring Valley Addition				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)	Residential				
A5. Latitude/Longitude: Lat.	39°03'28" N	Long.	94°53'17" W	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	9				
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)	989	sq ft	a) Square footage of attached garage	439	sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	2		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	48	sq in	c) Total net area of flood openings in A9.b		sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number	City of Bonner Springs 200361		B2. County Name	Wyandotte		B3. State	KS	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone A0, use base flood depth)			
117	D	09/02/2011	09/02/2011	AE	798			
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								

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: PID KE 1705 Vertical Datum: NAD 83

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.

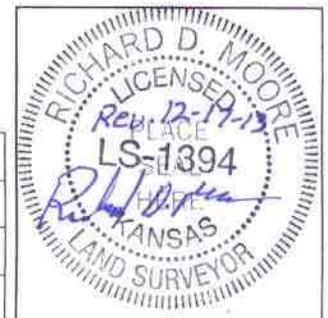
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>797.8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>801.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest 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>800.2</u>	<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)	<u>800.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>797.9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>800.2</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.

Check here if comments are provided on back of form. Check here if attachments. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Certifier's Name Richard D. Moore		License Number 1394	
Title Owner	Company Name Richard D. Moore Land Survey, Inc.		
Address 7540 Leavenworth Road, Suite 116	City Kansas City	State KS	ZIP Code 66109
Signature <i>Richard D. Moore</i>	Date 12/13/2013	Telephone (913) 334-3888	



ELEVATION CERTIFICATE, page 2

IMPORTANT: 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 PO, Route and Box No. 100 S. Park Street			Policy Number:	
City Bonner Springs	State KS	ZIP Code 66012	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:

C2e) Air conditioning unit pad at South side of the house.
C2f) LAG shown was at the bottom of an existing window well.

Signature

Date 12/13/2013

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 _____ feet meters above or below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ 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 _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ 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 _____

Address _____	City _____	State _____	ZIP Code _____
Signature _____	Date _____	Telephone _____	

Comments _____

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–G10) 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 _____

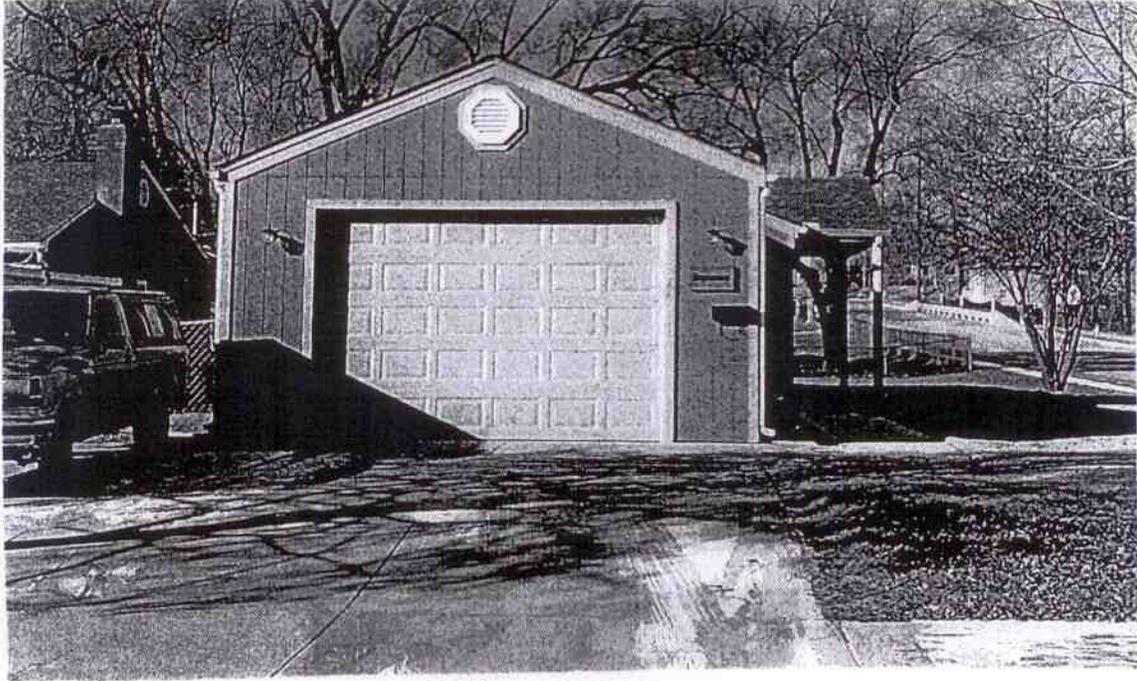
Signature _____ Date _____

Comments _____

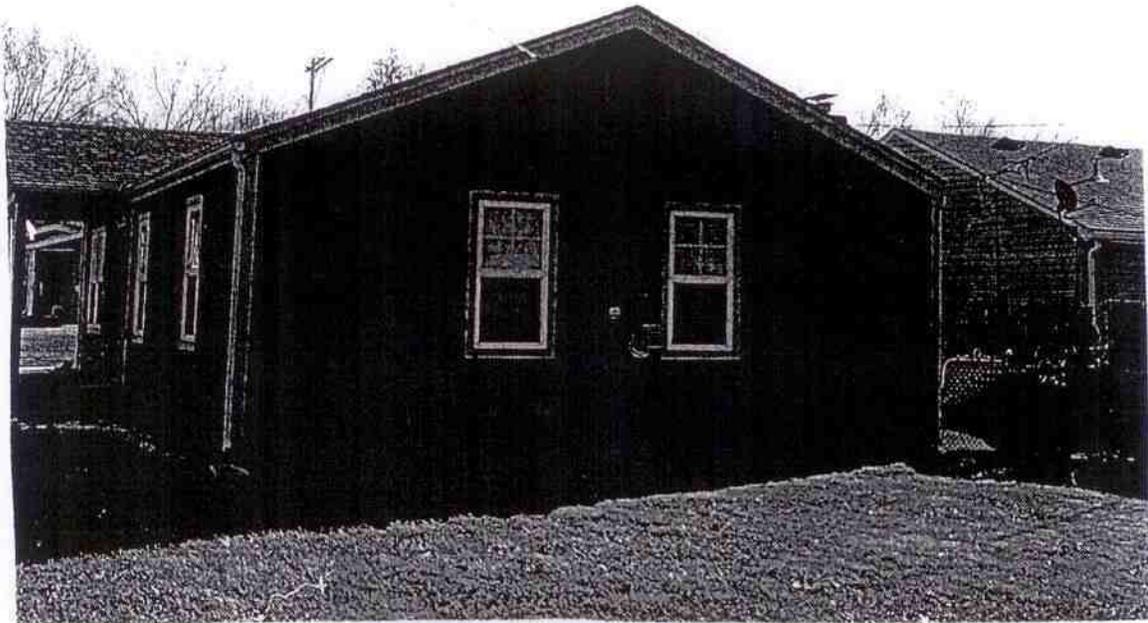
Check here if attachments.

IMPORTANT: 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. 100 S. Park Street			Policy Number:	
City Bonner Springs	State KS	ZIP Code 66012	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.



LEFT VIEW

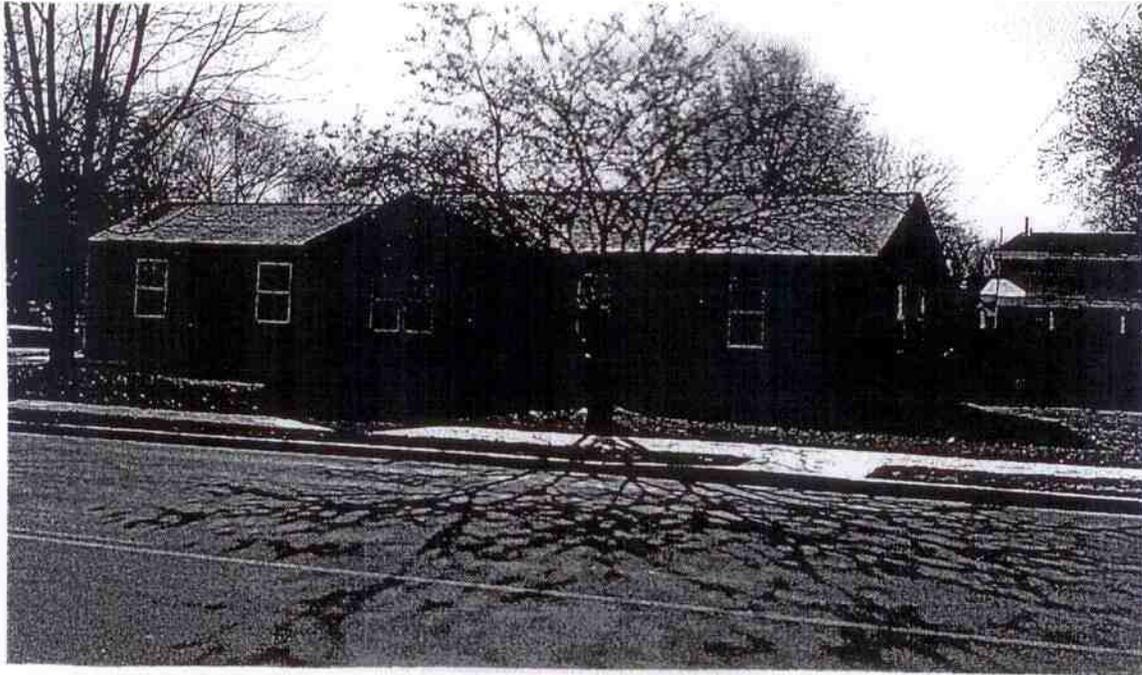


RIGHT VIEW

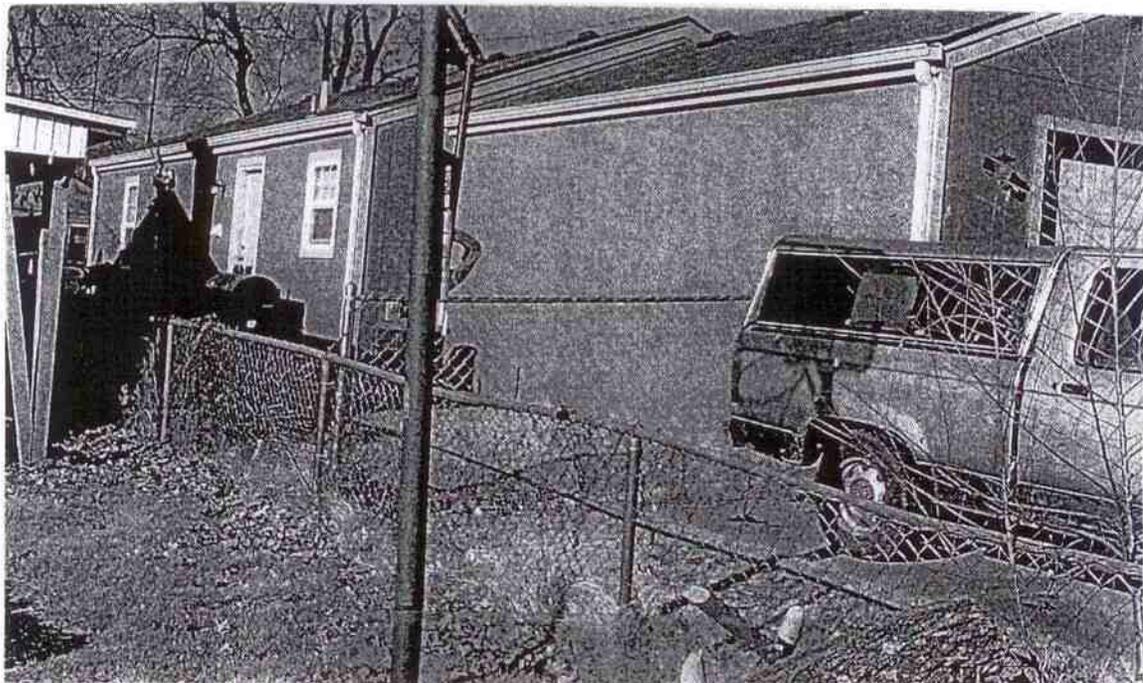
See Instructions for Item A6.

IMPORTANT: 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. 100 S. Park Street			Policy Number:	
City Bonner Springs	State KS	ZIP Code 66012	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.



FRONT VIEW



REAR VIEW

Title of Survey Wyandotte County, Kas.
 Approved for Record on the 11th day of June 1952
 at 10:30 A.M.
 Notary Public
 State of Kansas
 My Comm. Expires 1954
 [Signature]
 Notary Public

SPRING VALLEY ADDITION

BONNER SPRINGS, WYANDOTTE COUNTY, KAS.

State of Kansas, Wyandotte County, Kas.
 Approved for Record on the 11th day of June 1952
 at 10:30 A.M.
 Notary Public
 State of Kansas
 My Comm. Expires 1954
 [Signature]
 Notary Public

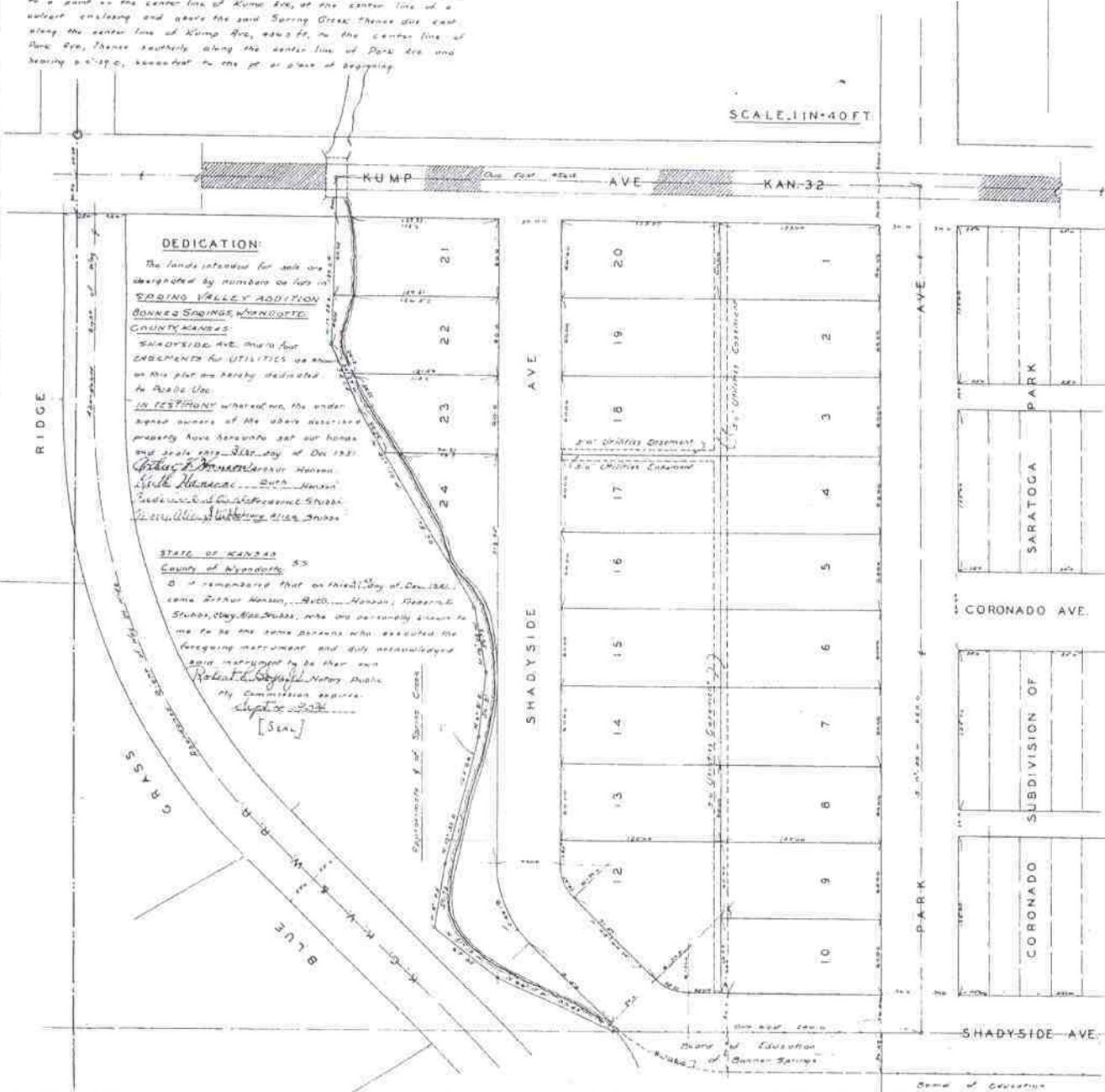
William J. Rutlett, COUNTY SURVEYOR
 June 9, 1952

DESCRIPTION:

The lands included within the boundaries of this Addition are as shown on the plat hereto attached and as shown on the plat hereto attached and as shown on the plat hereto attached...

Beginning at a point on the center line of Park Ave. in the Coronado Subdivision of Saratoga Park where the same is intersected by the center line of Shadyside Ave. Thence due west on a line drawn in prolongation of the said center line of Shadyside Ave. 260 feet to a point hereby fixed as an approximate center line of Spring Creek, thence north westerly, along the center line of Spring Creek, the following courses and distances: N 60° 15' W, 174.88 ft. to a point on the center line of Kump Ave. at the center line of a culvert crossing and above the said Spring Creek thence due east along the center line of Kump Ave. 260 ft. to the center line of Park Ave. thence southerly along the center line of Park Ave. and bearing a 1/4 sec. quarter to the pt. of place of beginning.

APPROVED W. T. ... MAYOR CITY OF BONNER SPRINGS
 APPROVED ... CITY ATTORNEY
 ATTEST ... CITY CLERK CITY OF BONNER SPRINGS
 APPROVED JAN 9 1952 [SEAL]



DEDICATION:
 The lands intended for sale are designated by numbers on this plat in the Spring Valley Addition, Bonner Springs, Wyandotte County, Kansas.
 SHADYSIDE AVE. and 1/4 sec. ENCLOSURES for UTILITIES as shown on this plat are hereby dedicated to Public Use.
 IN TESTIMONY WHEREOF, the undersigned owners of the above described property have hereunto set our hands and seals this 9th day of June 1952.
 [Signatures and Seals]

STATE OF KANSAS
 County of Wyandotte
 I, the undersigned, Notary Public, do hereby certify that on this 9th day of June 1952, the above described property was lawfully dedicated to public use by the owners thereof, and that the foregoing instrument and duly acknowledged and recorded by me as Notary Public.
 My Commission Expires 1954
 [Signature]
 [Seal]

