

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:	
BUILDING OWNER'S NAME			Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.			Company NAIC Number	
CITY Tyrone	STATE PA	ZIP CODE 16866		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)				
Tax Parcel Number				
BUILDING USE (e.g. Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)				
LATITUDE/LONGITUDE (OPTIONAL) (###-##-### or #####) 40° 40' 19.35" N / 78° 14' 17.25" W		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983		SOURCE: <input checked="" type="checkbox"/> GPS (Type) <u>Trimble</u> <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Borough of Tyrone 420164		B2. COUNTY NAME Blair		B3. STATE Pennsylvania	
B4. MAP AND PANEL NUMBER 420164 0002 B	B5. SUFFIX	B6. FIRM INDEX DATE	B7. FIRM PANEL EFFECTIVE/REVISED DATE May 2, 1983	B8. FLOOD ZONE(S) A12	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 895'

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 3 (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.) The building appears to most closely match Diagram 3, See Photos Attached

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 C3-a-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 NGVD 29 Conversion/Comments \_\_\_\_\_

Elevation reference mark used RM 3 Does the elevation reference mark used appear on the FIRM?  Yes  No

a) Top of bottom floor (including basement or enclosure) 891.54 ft.(m)

b) Top of next higher floor 894.04 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 (Describe in a Comments area) \_\_\_\_\_ ft.(m)

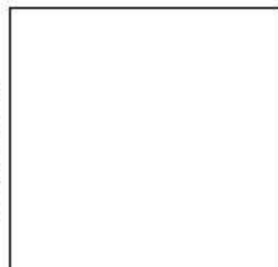
f) Lowest adjacent (finished) grade (LAG) 891.4 ft.(m)

g) Highest adjacent (finished) grade (HAG) 893.7 ft.(m)

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

i) Total area of all permanent openings (flood vents) in C3.h \_\_\_\_\_ sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date



License No.: 022851-E

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: <b>Fred M. Henry, PLS</b>		LICENSE NUMBER: <b>022851-E</b>	
TITLE: <b>Owner</b>		COMPANY NAME: <b>Henry Surveys, LLC</b>	
ADDRESS <b>P.O. Box 510</b>	CITY <b>Port Matilda</b>	STATE <b>PA</b>	ZIP CODE <b>16870</b>
SIGNATURE	DATE	TELEPHONE <b>814-692-8411</b>	