U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

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

ELEVATION CERTIFICATEImportant: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION					FOR INSUF	RANCE COMPANY USE	
"	A1. Building Owner's Name Woodside Association Inc. Policy Number:						ber:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Nu 2290 Woodside Lane						AIC Number:	
City Sacramento				State California		ZIP Code 95825	
1 ' '	• •	nd Block Numbers, Tax Sacramento County Re		Number, Legal De	scription, etc.)		
A4. Building Use (e.g., Resident	tial, Non-Residential, A	ddition	, Accessory, etc.)	Residential		
A5. Latitude/Longit	ude: Lat. <u>38</u>	i - 34' 53.13"	Long. <u>-</u> 1	21 - 24' 42.41"	Horizontal Datur	n: NAD 1	927 × NAD 1983
A6. Attach at least	2 photograph	ns of the building if the	Certific	ate is being used to	o obtain flood insur	ance.	
A7. Building Diagra	am Number	1B					
A8. For a building v	with a crawlsp	pace or enclosure(s):					
a) Square foot	age of crawls	space or enclosure(s)		sq ft			
b) Number of p	permanent flo	ood openings in the cra	ıwlspac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade
c) Total net are	ea of flood op	enings in A8.b	s	sq in			
d) Engineered	flood opening	gs? 🗌 Yes 🗌 No	Э				
A9. For a building v	A9. For a building with an attached garage:						
a) Square footage of attached garage sq ft							
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 A9.b sq in							
d) Engineered flood openings? Yes No							
	SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number Sacramento County 060262 B2. County Name Sacramento California							
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E	IRM Panel ffective/ evised Date	B8. Flood Zone(s	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)
06067C0183	Н	08/16/2012		5/2012	X (Shaded)	36.0	,
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other/Source:							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🗵 No							
Designation [Designation Date: CBRS DPA						

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding inf	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Blo 2290 Woodside Lane	Policy Number:				
City State Sacramento Californ	ZIP C nia 9582		Company NAIC Number		
SECTION C – BUILDING ELEV	ATION INFORMATI	ON (SURVEY RI	EQUIRED)		
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on:					
h) Lowest adjacent grade at lowest elevation of deck o structural support		N/A	X feet meters		
SECTION D – SURVEYOR, EN	· · · · · · · · · · · · · · · · · · ·				
This certification is to be signed and sealed by a land survey I certify that the information on this Certificate represents my statement may be punishable by fine or imprisonment under Were latitude and longitude in Section A provided by a licens	best efforts to interper 18 U.S. Code, Sections and surveyor?	oret the data availa on 1001. 	/ law to certify elevation information. able. I understand that any false Check here if attachments.		
	icense Number LS 8964		I and the second		
	tate alifornia	ZIP Code 95835	No. LS 8964 ** ** ** ** ** ** ** ** **		
3	Pate 0/04/2016	Telephone (707) 592-0465			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.					
Comments (including type of equipment and location, per C2 C2(e) - Transformer on concrete pad near building.					

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSURA	ANCE COMPANY USE
	ding Street Address (including Apt., Unit, Suite) Woodside Lane	, and/or Bldg. No.) o	r P.O. Route and Bo	x No.	Policy Number	er:
City Sacr	ramento	State California	ZIP Code 95825		Company NA	IC Number
	SECTION E – BUILDING FOR Z		ORMATION (SURV NE A (WITHOUT BI		REQUIRED)	
com	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.					
	Provide elevation information for the following the highest adjacent grade (HAG) and the low a) Top of bottom floor (including basement,			w whethe	the elevation	is above or below
	crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet	meter	s above	or
	crawlspace, or enclosure) is		feet	meter	_	or below the LAG.
	For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	od openings provide	ed in Section A Items	8 and/or		or below the HAG.
E3.	Attached garage (top of slab) is		feet	meter	s above	or
	Top of platform of machinery and/or equipmer servicing the building is	nt	feet	meter	s 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 OWN	ER'S REPRESENTA	TIVE) CE	RTIFICATION	I
The comi	property owner or owner's authorized represer munity-issued BFE) or Zone AO must sign her	ntative who complete e. The statements in	es Sections A, B, and Sections A, B, and	d E for Zo E are cor	ne A (without a	a FEMA-issued or t of my knowledge.
-	perty Owner or Owner's Authorized Representands deside Association Inc.	ative's Name				
Addr			City	Sta		ZIP Code
	2 Woodside Lane lature		Sacramento Date		llifornia lephone	95825
Olgii			Date	10	юрноно	
Com	ments					
					☐ Checl	k here 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, St 2290 Woodside Lane	lo. Policy Number:					
City Sacramento	State California	ZIP Code 95825	Company NAIC Number			
SECTIO	N G – COMMUNITY IN	IFORMATION (OPTION	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.						
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 Zone AO.	on E for a building locat	ed in Zone A (without a	FEMA-issued or community-issued BFE)			
G3. The following information (Items G4–	G10) is provided for cor	mmunity floodplain man	agement purposes.			
G4. Permit Number	G5. Date Permit Issue	ed	G6. Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:	New Construction	Substantial Improveme	nt			
G8. Elevation of as-built lowest floor (including of the building:	feet meters Datum					
G9. BFE or (in Zone AO) depth of flooding at t	he 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 location, per C2(e), if applicable)						
			Check here if attachments.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE		
Building Street Address (including 2290 Woodside Lane	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Sacramento	California	95825	

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

Photo One Caption Side View



Photo Two

Photo Two Caption Building Entrance

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including 2290 Woodside Lane	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Sacramento	California	95825	

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

Photo One Caption Alt. building side view



Photo Two

Photo Two Caption Alt. Building Side view with transformer near the building