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

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

Important: 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 INSU	RANCE COMPANY USE		
A1. Building Owner's Name Giron Builders, Inc. Policy Number					ber:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company 3420 Hilldale Road					Company N	IAIC Number:	
City Alexander				State Arkansa	S	ZIP Code 72002	
A3. Property Desc Lot 11, Jacob's Co	. ,	nd Block Numbers, Ta	ax Parcel	Number, Leç	gal Description, et	tc.)	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential							
A5. Latitude/Longi	tude: Lat. <u>3</u>	4.392629°N	Long. 92	2.292257°W	Horizonta	al Datum: NAD	1927 × NAD 1983
A6. Attach at least	: 2 photograp	hs of the building if the	e Certific	ate is being ເ	sed to obtain floo	od insurance.	
A7. Building Diagr	am Number	1A					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of craw	lspace or enclosure(s)			0.00 sq ft		
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foo	t above adjacent gr	ade 0
c) Total net ar	ea of flood o	penings in A8.b		0.00 sq in	1		
d) Engineered	I flood openir	ngs? Yes 🗵	No				
A9. For a building v	vith an attach	ned garage:					
a) Square foot	age of attach	ned garage		500.00 sq ft			
b) Number of	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above ad	jacent grade 0	
c) Total net ar	ea of flood o _l	penings in A9.b		0.00 sq	in		
d) Engineered	flood openin	ngs? ☐ Yes 🕱 N	No				
, 0							
	SE	ECTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) INF	ORMATION	1
B1. NFIP Commun Saline County, 050	-	Community Number		B2. County Saline			B3. State Arkansas
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	Elevation(s) e Base Flood Depth)
05125C0240	Е	06-05-2020	06-05-2		AE	402.8	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: X FIS Profile							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:							
B12. Is the buildin	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No						
Designation	Date:		CBRS	☐ OPA			
							

IMPORTANT: In these spaces, copy the	corresponding information from Sec	tion A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., U 3420 Hilldale Road	nit, Suite, and/or Bldg. No.) or P.O. Rout	e and Box No.	Policy Number:
City Alexander	State ZIP (Arkansas 7200		Company NAIC Number
SECTION C -	BUILDING ELEVATION INFORMAT	ION (SURVEY RE	QUIRED)
	required when construction of the buildir	•	
C2. Elevations – Zones A1–A30, AE, A Complete Items C2.a–h below acco Benchmark Utilized: <u>ArDOT GPS N</u>	ording to the building diagram specified in	n Item A7. In Puerto	
Indicate elevation datum used for th	ne elevations in items a) through h) belov	٧.	
☐ NGVD 1929 区 NAVD 1			
Datum used for building elevations	must be the same as that used for the B	FE.	Check the measurement used.
a) Top of bottom floor (including ba	asement, crawlspace, or enclosure floor)		404.8 × feet meters
,	dement, orawispace, or enclosure near)		N/A feet meters
b) Top of the next higher floor			
c) Bottom of the lowest horizontal s	structural member (V Zones only)		N/A feet meters
d) Attached garage (top of slab)			403.8 X feet meters
e) Lowest elevation of machinery of (Describe type of equipment and	or equipment servicing the building d location in Comments)		403.8 × feet meters
f) Lowest adjacent (finished) grade	e next to building (LAG)		403.8 × feet meters
g) Highest adjacent (finished) grad	e next to building (HAG)		N/A feet meters
h) Lowest adjacent grade at lowes structural support	t elevation of deck or stairs, including		403.8 X feet meters
SECTION D	- SURVEYOR, ENGINEER, OR ARC	HITECT CERTIFI	CATION
I certify that the information on this Certi	lled by a land surveyor, engineer, or arch ficate represents my best efforts to interp imprisonment under 18 U.S. Code, Sect	oret the data availa	law to certify elevation information. ble. I understand that any false
Were latitude and longitude in Section A	provided by a licensed land surveyor?	☐ Yes ⊠ No	Check here if attachments.
Certifier's Name	License Number		CTATE OF
Kazi Islam, PE	20876		
Title Civil Engineer, PE			ARKANSAS ***
Company Name Hope Consulting			LICENSED PROFESSIONAL ENGINEER
Address			ENGINEER
129 North Main Street			* * *
City	State	ZIP Code	NO. 20070
Benton	Arkansas	72015	
Signature	Date	Telephone (501) 315-2626	Ext.
Copy all pages of this Elevation Certificate	e and all attachments for (1) community off	icial, (2) insurance a	agent/company, and (3) building owner.
Comments (including type of equipment C2e is the elevation of the top of the A/C C2. Exceeding these minimums is encor	pad. The purpose of this elevation certification	ficate is to establish	the minimum elevations in section
İ			

MPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite 3420 Hilldale Road	e, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Number
SECTION E - BUILDING	G ELEVATION INFO	PRMATION (SURVEY NO IE A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Iten complete Sections A, B,and C. For Items E1–E4, enter meters.	ns E1–E5. If the Certif	icate is intended to support	
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the lov			ner the elevation is above or below
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet _ met	ers above or below the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet met	ers above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	ood openings provided	d in Section A Items 8 and/ ☐ feet ☐ met	
E3. Attached garage (top of slab) is			ers above or below the HAG.
E4. Top of platform of machinery and/or equipme servicing the building is	ent 		ers above or below the HAG.
E5. Zone AO only: If no flood depth number is av floodplain management ordinance? Yes			accordance with the community's st certify this information in Section G.
SECTION F - PROPERTY	OWNER (OR OWNE	R'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign he	entative who complete ere. The statements in	s Sections A, B, and E for 2 Sections A, B, and E are c	Zone A (without a FEMA-issued or or or contract to the best of my knowledge.
Property Owner or Owner's Authorized Represent	tative's Name		
Address		City	State ZIP Code
Signature		Date	 Celephone
Comments			
			☐ Check here if attachments.

MPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, St 3420 Hilldale Road	uite, and/or Bldg. N	No.) or P.O. Route and Bo	x No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002		Company NAIC Number	
SECTIO	N G - COMMUN	ITY INFORMATION (OPT	IONAL)		
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comp				
	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation				
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 f	for community floodplain n	nanageme	ent purposes.	
G4. Permit Number	G5. Date Permi	t Issued		Date Certificate of Compliance/Occupancy Issued	
G7. This permit has been issued for:] New Construction	on Substantial Improve	ment		
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 loo	cation, per C2(e), i	if applicable)			
				Check here if attachments.	

ELEVATION CERTIFICATE

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, S 3420 Hilldale Road	Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Nur	mber
If using the Elevation Certificate to obtain instructions for Item A6. Identify all photograp "Left Side View." When applicable, photograp vents, as indicated in Section A8. If submitting	NFIP flood insurance, ohs with date taken; "Fro aphs must show the fou	affix at least 2 building ph nt View" and "Rear View"; an undation with representative	d, if required, "Right sexamples of the floo	Side View" and
	Photo	One		
	Photo C	ne		
Photo One Caption				Clear Photo One
	Photo	Two		
Dhata Tina Cantis	Photo T	wo		01 51 : 5
Photo Two Caption				Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE	COMPANY USE
Building Street Address (including Apt., Unit, Suite, a 3420 Hilldale Road	nd/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	Company NAIC Nu	mber
Alexander	Arkansas	72002		
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View" photographs must show the foundation with represe	; and, if required,	"Right Side View" and "	Left Side View." Wh	en applicable,
	Photo T	hree		
	Photo Thr	ee		
Photo Three Caption				Clear Photo Three
	Photo F	our		
Dhata Farin Continu	Photo Fo	ur		01
Photo Four Caption				Clear Photo Four

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

OMB No. 1660-0008 Expiration Date: November 30, 2022

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 Giron Builders, Inc.					Policy Numl	per:
3420 Hilldale Road					AIC Number:	
City			State		ZIP Code	
Alexander	J.D L. Niveshoro, To	· D====	Arkansas		72002	
Lot 7, Jacob's Corner	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 7, Jacob's Corner					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential						
A5. Latitude/Longitude: Lat.	34.392793°N	Long. <u>9</u> 2	2.291677°W	Horizontal	l Datum: 🔲 NAD 1	927 × NAD 1983
A6. Attach at least 2 photogra	phs of the building if the	e Certific	:ate is being ບ	sed to obtain floor	d insurance.	
A7. Building Diagram Number	1A					
A8. For a building with a crawl	space or enclosure(s):					
a) Square footage of crav	/Ispace or enclosure(s)			0.00 sq ft		
b) Number of permanent f	lood openings in the cra	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade <u>0</u>
c) Total net area of flood	openings in A8.b		0.00 sq in	ı		
d) Engineered flood open	ings? Yes X N	10				
A9. For a building with an attac	hed garage:					
a) Square footage of attac	hed garage		500.00 sq ft			
b) Number of permanent f	lood openings in the att	tached g	arage within	1.0 foot above adja	acent grade 0	
c) Total net area of flood of	ppenings in A9.b		0.00 sq	in		
d) Engineered flood openi	ngs? Yes X N	10				
	PECTION B. ELOOD I	NOUDA	NOE BATE	MAD (EIDM) INE		
	Community Number	NOUKA	1	, ,	ORWATION	DO Otata
B1. NFIP Community Name & Saline County, 050191	Community Nurribei		B2. County Saline			B3. State Arkansas
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
05125C0240 E	06-05-2020	06-05-2		AE	402.0	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:						
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 Reso	urces Sy	ystem (CBRS) area or Otherwis	e Protected Area (DPA)? ☐ Yes ※ No
Designation Date:	П	CBRS	□ OPA			
			_			

IMPORTANT: In these spaces, copy the	corresponding information from Sec	tion A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., U 3420 Hilldale Road	nit, Suite, and/or Bldg. No.) or P.O. Rout	e and Box No.	Policy Number:
City Alexander	State ZIP (Arkansas 7200		Company NAIC Number
SECTION C -	BUILDING ELEVATION INFORMAT	ION (SURVEY RE	QUIRED)
	required when construction of the buildir	•	
C2. Elevations – Zones A1–A30, AE, Al Complete Items C2.a–h below acco Benchmark Utilized: <u>ArDOT GPS N</u>	rding to the building diagram specified in	n Ítem A7. In Puerto	
Indicate elevation datum used for th	e elevations in items a) through h) belov	٧.	
☐ NGVD 1929 ⊠ NAVD 1			
Datum used for building elevations i	must be the same as that used for the B	FE.	Check the measurement used.
a) Top of bottom floor (including ba	sement, crawlspace, or enclosure floor)		404.0 ⊠ feet ☐ meters
b) Top of the next higher floor	,		N/A feet meters
c) Bottom of the lowest horizontal s	tructural member (V Zones only)		N/A ☐ feet ☐ meters
d) Attached garage (top of slab)	tractara member (v Zenec emy)		403.0 X feet meters
e) Lowest elevation of machinery o (Describe type of equipment and	r equipment servicing the building location in Comments)		403.0 × feet meters
f) Lowest adjacent (finished) grade	•		403.0 X feet meters
g) Highest adjacent (finished) grade			N/A feet meters
, , , , , , , , , , , , , , , , , , , ,	elevation of deck or stairs, including		403.0 × feet meters
SECTION D	– SURVEYOR, ENGINEER, OR ARC	HITECT CERTIFI	CATION
This certification is to be signed and sea I certify that the information on this Certi- statement may be punishable by fine or	ficate represents my best efforts to interp	oret the data availa	law to certify elevation information. ble. I understand that any false
Were latitude and longitude in Section A	provided by a licensed land surveyor?	☐ Yes ⊠ No	Check here if attachments.
Certifier's Name Kazi Islam, PE	License Number 20876		STATE OF
Title	20070		ARKANSAS
Civil Engineer, PE			* * * *
Company Name Hope Consulting			LICENSED PROFESSIONAL ENGINEER
Address			ENGINEER N
129 North Main Street			NO. 20876
City Benton	State Arkansas	ZIP Code 72015	TAMZIDUL.
Signature	Date	Telephone (501) 315-2626	Ext.
Copy all pages of this Elevation Certificate	and all attachments for (1) community off	icial, (2) insurance a	agent/company, and (3) building owner.
Comments (including type of equipment C2e is the elevation of the top of the A/C C2. Exceeding these minimums is encou	pad. The purpose of this elevation certification	ficate is to establish	the minimum elevations in section

MPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite 3420 Hilldale Road	e, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Number
SECTION E - BUILDING	G ELEVATION INFO	PRMATION (SURVEY NO IE A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Iten complete Sections A, B,and C. For Items E1–E4, enter meters.	ns E1–E5. If the Certif	icate is intended to support	
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the lov			ner the elevation is above or below
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet _ met	ers above or below the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet met	ers above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	ood openings provided	d in Section A Items 8 and/ ☐ feet ☐ met	
E3. Attached garage (top of slab) is			ers above or below the HAG.
E4. Top of platform of machinery and/or equipme servicing the building is	ent 		ers above or below the HAG.
E5. Zone AO only: If no flood depth number is av floodplain management ordinance? Yes			accordance with the community's st certify this information in Section G.
SECTION F - PROPERTY	OWNER (OR OWNE	R'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign he	entative who complete ere. The statements in	s Sections A, B, and E for 2 Sections A, B, and E are c	Zone A (without a FEMA-issued or or or contract to the best of my knowledge.
Property Owner or Owner's Authorized Represent	tative's Name		
Address		City	State ZIP Code
Signature		Date	 Celephone
Comments			
			☐ Check here if attachments.

MPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, St 3420 Hilldale Road	uite, and/or Bldg. N	No.) or P.O. Route and Bo	x No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002		Company NAIC Number	
SECTIO	N G - COMMUN	ITY INFORMATION (OPT	IONAL)		
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comp				
	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation				
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 f	for community floodplain n	nanageme	ent purposes.	
G4. Permit Number	G5. Date Permi	t Issued		Date Certificate of Compliance/Occupancy Issued	
G7. This permit has been issued for:] New Construction	on Substantial Improve	ment		
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 loo	cation, per C2(e), i	if applicable)			
				Check here if attachments.	

ELEVATION CERTIFICATE

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, S 3420 Hilldale Road	Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Nur	mber
If using the Elevation Certificate to obtain instructions for Item A6. Identify all photograp "Left Side View." When applicable, photograp vents, as indicated in Section A8. If submitting	NFIP flood insurance, ohs with date taken; "Fro aphs must show the fou	affix at least 2 building ph nt View" and "Rear View"; an undation with representative	d, if required, "Right sexamples of the floo	Side View" and
	Photo	One		
	Photo C	ne		
Photo One Caption				Clear Photo One
	Photo	Two		
Dhata Tina Cantis	Photo T	wo		01 51 : 5
Photo Two Caption				Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE	COMPANY USE
Building Street Address (including Apt., Unit, Suite, a 3420 Hilldale Road	nd/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	Company NAIC Nu	mber
Alexander	Arkansas	72002		
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View" photographs must show the foundation with represe	; and, if required,	"Right Side View" and "	Left Side View." Wh	en applicable,
	Photo T	hree		
	Photo Thr	ee		
Photo Three Caption				Clear Photo Three
	Photo F	our		
Dhata Farin Continu	Photo Fo	ur		01
Photo Four Caption				Clear Photo Four

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

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

Important: 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 INSUI	RANCE COMPANY USE		
A1. Building Owner's Name Giron Builders, Inc. Policy Num					iber:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NA 3420 Hilldale Road					NAIC Number:		
City Alexander				State Arkansa	S	ZIP Code 72002	
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 9, Jacob's Corner						
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential						
A5. Latitude/Longi	tude: Lat. <u>3</u>	4.392679°N	Long. 92	2.291680°W	Horizonta	al Datum: NAD	1927 × NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being ι	sed to obtain floo	od insurance.	
A7. Building Diagra	am Number	1A					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of craw	lspace or enclosure(s)			0.00 sq ft		
b) Number of p	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foo	t above adjacent gr	ade 0
c) Total net ar	ea of flood o	penings in A8.b		0.00 sq in	1		
d) Engineered	l flood openii	ngs? Yes 🗵 N	10				
A9. For a building v	vith an attacl	ned garage:					
a) Square foot	age of attach	ned garage		500.00 sq ft			
b) Number of p	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above ad	jacent grade 0	
c) Total net ar	ea of flood o	penings in A9.b		0.00 sq	in		
d) Engineered	flood openir	ngs? ☐ Yes 🕱 N	10				
		ECTION B – FLOOD	INSURA	i	, ,	FORMATION	+
B1. NFIP Commun Saline County, 050	-	Community Number		B2. County Saline			B3. State Arkansas
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	Elevation(s) se Base Flood Depth)
05125C0240	E	06-05-2020	06-05-2		AE	401.5	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood Elevat							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? \sum Yes \omega No							
Designation l	-		_	OPA		· ·	_ _
				_ _			

			Aprilation Bato: Novombor 60, 2022
IMPORTANT: In these spaces, copy the	corresponding information from Sec	ction A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., U 3420 Hilldale Road	nit, Suite, and/or Bldg. No.) or P.O. Rou	ite and Box No.	Policy Number:
City Alexander	State ZIP Arkansas 720		Company NAIC Number
SECTION C -	- BUILDING ELEVATION INFORMA	TION (SURVEY REC	QUIRED)
C1. Building elevations are based on: *A new Elevation Certificate will be		ding Under Construc ng is complete.	tion* Finished Construction
C2. Elevations – Zones A1–A30, AE, Al Complete Items C2.a–h below acco Benchmark Utilized: ArDOT GPS N	ording to the building diagram specified	in Item A7. In Puerto	
Indicate elevation datum used for th	ne elevations in items a) through h) belo	W.	
□ NGVD 1929 × NAVD 1	, ,		
	must be the same as that used for the E	BFE.	Check the measurement used.
a). Top of bottom floor (including bo	acoment erawlandes er analogura floor	. Δ	103.5 X feet meters
, , ,	asement, crawlspace, or enclosure floor	/	N/A feet meters
b) Top of the next higher floor	structural member (// Zence enly)		N/A feet meters
c) Bottom of the lowest horizontal sd) Attached garage (top of slab)	structural member (v Zones only)		02.5 \times feet \square meters
e) Lowest elevation of machinery of	or equipment servicing the building	·	<u></u>
(Describe type of equipment and	d location in Comments)	4	02.5 X feet meters
f) Lowest adjacent (finished) grade	e next to building (LAG)	4	02.5 X feet meters
g) Highest adjacent (finished) grad	e next to building (HAG)		N/A feet meters
 h) Lowest adjacent grade at lowest structural support 	t elevation of deck or stairs, including	4	02.5 X feet meters
SECTION D	- SURVEYOR, ENGINEER, OR ARC	CHITECT CERTIFIC	ATION
This certification is to be signed and sea I certify that the information on this Certi statement may be punishable by fine or	ficate represents my best efforts to inte	rpret the data availab	aw to certify elevation information. le. I understand that any false
Were latitude and longitude in Section A	a provided by a licensed land surveyor?	☐ Yes ⊠ No	Check here if attachments.
Certifier's Name	License Number		
Kazi Islam, PE Title	20876		STATE OF
Civil Engineer, PE			
Company Name			LICENSED
Hope Consulting			PROFESSIONAL
Address 129 North Main Street			LICENSED PROFESSIONAL ENGINEER NO. 20876
City	State	ZIP Code	PAMZINIL
Benton	Arkansas	72015	200080000
Signature	Date	Telephone (501) 315-2626	Ext.
Copy all pages of this Elevation Certificate	e and all attachments for (1) community o	fficial, (2) insurance aç	gent/company, and (3) building owner.
Comments (including type of equipment C2e is the elevation of the top of the A/C C2. Exceeding these minimums is encou	pad. The purpose of this elevation cert	ificate is to establish	the minimum elevations in section

MPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite 3420 Hilldale Road	e, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Number
SECTION E - BUILDING	G ELEVATION INFO	PRMATION (SURVEY NO IE A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Iten complete Sections A, B,and C. For Items E1–E4, enter meters.	ns E1–E5. If the Certif	icate is intended to support	
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the lov			ner the elevation is above or below
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet _ met	ers above or below the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet met	ers above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	ood openings provided	d in Section A Items 8 and/ ☐ feet ☐ met	
E3. Attached garage (top of slab) is			ers above or below the HAG.
E4. Top of platform of machinery and/or equipme servicing the building is	ent 		ers above or below the HAG.
E5. Zone AO only: If no flood depth number is av floodplain management ordinance? Yes			accordance with the community's st certify this information in Section G.
SECTION F - PROPERTY	OWNER (OR OWNE	R'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign he	entative who complete ere. The statements in	s Sections A, B, and E for 2 Sections A, B, and E are c	Zone A (without a FEMA-issued or or or contract to the best of my knowledge.
Property Owner or Owner's Authorized Represent	tative's Name		
Address		City	State ZIP Code
Signature		Date	 Celephone
Comments			
			☐ Check here if attachments.

MPORTANT: In these spaces, copy the corre		FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, St 3420 Hilldale Road	uite, and/or Bldg. N	No.) or P.O. Route and Bo	x No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002		Company NAIC Number	
SECTIO	N G - COMMUN	ITY INFORMATION (OPT	IONAL)		
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comp				
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)					
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 f	for community floodplain n	nanageme	ent purposes.	
G4. Permit Number	G5. Date Permi	t Issued		Date Certificate of Compliance/Occupancy Issued	
G7. This permit has been issued for:] New Construction	on Substantial Improve	ment		
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 loo	cation, per C2(e), i	if applicable)			
				Check here if attachments.	

ELEVATION CERTIFICATE

See Instructions for Item A6.

MPORTANT: In these spaces, copy the corr	responding information	from Section A.	FOR INSURANCE	COMPANY USE
Building Street Address (including Apt., Unit, S 3420 Hilldale Road	Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Nur	mber
If using the Elevation Certificate to obtain instructions for Item A6. Identify all photograp "Left Side View." When applicable, photograp vents, as indicated in Section A8. If submitting	NFIP flood insurance, ohs with date taken; "Fro aphs must show the fou	affix at least 2 building ph nt View" and "Rear View"; an undation with representative	d, if required, "Right sexamples of the floo	Side View" and
	Photo	One		
	Photo C	ne		
Photo One Caption				Clear Photo One
	Photo	Two		
Dhata Tina Cantis	Photo T	wo		01 51 : 5
Photo Two Caption				Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

IMPORTANT: In these spaces, copy the correspon	from Section A.	FOR INSURANCE	COMPANY USE	
Building Street Address (including Apt., Unit, Suite, a 3420 Hilldale Road	nd/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	Company NAIC Nu	mber
Alexander	Arkansas	72002		
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View" photographs must show the foundation with represe	; and, if required,	"Right Side View" and "	Left Side View." Wh	en applicable,
	Photo T	hree		
	Photo Thr	ee		
Photo Three Caption				Clear Photo Three
	Photo F	our		
Dhata Farin Continu	Photo Fo	ur		01
Photo Four Caption				Clear Photo Four

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

OMB No. 1660-0008 Expiration Date: November 30, 2022

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 Giron Builders, Inc.					Policy Numl	per:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC 3420 Hilldale Road					AIC Number:	
City			State		ZIP Code	
Alexander	I Die els Nousek eue. Te	· Danaal	Arkansas		72002	
Lot 8, Jacob's Corner	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 8, Jacob's Corner					
A4. Building Use (e.g., Reside	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential					
A5. Latitude/Longitude: Lat.	34.392736°N	Long. <u>9</u> 2	2.291677°W	Horizonta	l Datum: 🔲 NAD 1	927 × NAD 1983
A6. Attach at least 2 photogra	phs of the building if the	e Certific	:ate is being ບ	ised to obtain floor	d insurance.	
A7. Building Diagram Number	1A					
A8. For a building with a craw	Ispace or enclosure(s):					
a) Square footage of crav	vlspace or enclosure(s)			0.00 sq ft		
b) Number of permanent	lood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade <u>0</u>
c) Total net area of flood	openings in A8.b		0.00 sq in	ı		
d) Engineered flood open	ings? Yes 🗓 Yes	10				
A9. For a building with an attac	ched garage:					
a) Square footage of attac	ched garage		500.00 sq ft			
b) Number of permanent	flood openings in the at	tached g	jarage within	1.0 foot above adj	acent grade 0	
c) Total net area of flood	openings in A9.b		0.00 sq	in		
d) Engineered flood open	ings? Yes X N	10				
	STOTION B. ELOOD	INGLIDA	NOE DATE	MAD (EIDM) INE		
	SECTION B - FLOOD	NSUKA	†	, ,	ORMATION	D0 01 1-
B1. NFIP Community Name & Saline County, 050191	Community Number		B2. County Saline			B3. State Arkansas
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
05125C0240 E	06-05-2020	06-05-2		AE	401.8	
B10 Indicate the source of the	e Base Flood Flevation	(BFF) d	ata or base flo	ood depth entered	in Item B9	
	B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: X 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 Reso	ources Sy	ystem (CBRS) area or Otherwis	e Protected Area (DPA)? ☐ Yes ※ No
Designation Date:		CBRS	□ OPA			
			_			

IMPORTANT: In these spaces, copy the corresponding	ction A.	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or 3420 Hilldale Road	Policy Number:			
City State Alexander Arka	e ZIP ansas 720	Code 02	Company NAIC Number	
SECTION C – BUILDING ELE	VATION INFORMA	TION (SURVEY RE	QUIRED)	
C1. Building elevations are based on:	n Drawings*	Iding Under Construing is complete. FE), AR, AR/A, AR/A, in Item A7. In Puerto NAVD 1988 BFE. BFE.	ction*	
 h) Lowest adjacent grade at lowest elevation of decl structural support 	∢ or stairs, including		402.8 X feet meters	
SECTION D – SURVEYOR,	ENGINEER, OR AR	CHITECT CERTIFI	CATION	
This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und Were latitude and longitude in Section A provided by a lice	my best efforts to inte der 18 U.S. Code, Sed	rpret the data availa ction 1001.	law to certify elevation information. ble. I understand that any false Check here if attachments.	
Certifier's Name Kazi Islam, PE Title Civil Engineer, PE Company Name Hope Consulting Address 129 North Main Street City Benton Signature	State Arkansas Date	ZIP Code 72015 Telephone	ARKANSAS *** LICENSED PROFESSIONAL ENGINEER ** NO. 20876 AMZIDUL Ext.	
		(501) 315-2626		
Copy all pages of this Elevation Certificate and all attachments. Comments (including type of equipment and location, per C2e is the elevation of the top of the A/C pad. The purpos C2. Exceeding these minimums is encouraged.	C2(e), if applicable)			

MPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite 3420 Hilldale Road	e, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Number
SECTION E - BUILDING	G ELEVATION INFO	PRMATION (SURVEY NO IE A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Iten complete Sections A, B,and C. For Items E1–E4, enter meters.	ns E1–E5. If the Certif	icate is intended to support	
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the lov			ner the elevation is above or below
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet _ met	ers above or below the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet met	ers above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	ood openings provided	d in Section A Items 8 and/ ☐ feet ☐ met	
E3. Attached garage (top of slab) is			ers above or below the HAG.
E4. Top of platform of machinery and/or equipme servicing the building is	ent 		ers above or below the HAG.
E5. Zone AO only: If no flood depth number is av floodplain management ordinance? Yes			accordance with the community's st certify this information in Section G.
SECTION F - PROPERTY	OWNER (OR OWNE	R'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign he	entative who complete ere. The statements in	s Sections A, B, and E for 2 Sections A, B, and E are c	Zone A (without a FEMA-issued or or or contract to the best of my knowledge.
Property Owner or Owner's Authorized Represent	tative's Name		
Address		City	State ZIP Code
Signature		Date	 Celephone
Comments			
			☐ Check here if attachments.

MPORTANT: In these spaces, copy the corre		FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, St 3420 Hilldale Road	uite, and/or Bldg. N	No.) or P.O. Route and Bo	x No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002		Company NAIC Number	
SECTIO	N G - COMMUN	ITY INFORMATION (OPT	IONAL)		
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comp				
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)					
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 f	for community floodplain n	nanageme	ent purposes.	
G4. Permit Number	G5. Date Permi	t Issued		Date Certificate of Compliance/Occupancy Issued	
G7. This permit has been issued for:] New Construction	on Substantial Improve	ment		
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 loo	cation, per C2(e), i	if applicable)			
				Check here if attachments.	

ELEVATION CERTIFICATE

See Instructions for Item A6.

MPORTANT: In these spaces, copy the corr	responding information	from Section A.	FOR INSURANCE	COMPANY USE
Building Street Address (including Apt., Unit, S 3420 Hilldale Road	Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Nur	mber
If using the Elevation Certificate to obtain instructions for Item A6. Identify all photograp "Left Side View." When applicable, photograp vents, as indicated in Section A8. If submitting	NFIP flood insurance, ohs with date taken; "Fro aphs must show the fou	affix at least 2 building ph nt View" and "Rear View"; an undation with representative	d, if required, "Right sexamples of the floo	Side View" and
	Photo	One		
	Photo C	ne		
Photo One Caption				Clear Photo One
	Photo	Two		
Dhata Tina Cantis	Photo T	wo		01 51 : 5
Photo Two Caption				Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

IMPORTANT: In these spaces, copy the correspon	from Section A.	FOR INSURANCE	COMPANY USE	
Building Street Address (including Apt., Unit, Suite, a 3420 Hilldale Road	nd/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	Company NAIC Nu	mber
Alexander	Arkansas	72002		
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View" photographs must show the foundation with represe	; and, if required,	"Right Side View" and "	Left Side View." Wh	en applicable,
	Photo T	hree		
	Photo Thr	ee		
Photo Three Caption				Clear Photo Three
	Photo F	our		
Dhata Farin Continu	Photo Fo	ur		01
Photo Four Caption				Clear Photo Four

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

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

Important: 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 Policy Number: Giron Builders, Inc.					ber:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC N 3420 Hilldale Road					IAIC Number:		
City Alexander				State Arkansa	S	ZIP Code 72002	
	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 12, Jacob's Corner						
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential						
A5. Latitude/Longi	tude: Lat. <u>3</u>	4.392631°N	Long. 92	2.292327°W	Horizonta	al Datum: NAD	1927 × NAD 1983
A6. Attach at least	: 2 photograp	hs of the building if the	e Certific	ate is being ເ	sed to obtain floo	d insurance.	
A7. Building Diagra	am Number	1A					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of craw	lspace or enclosure(s)			0.00 sq ft		
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foo	t above adjacent gra	ade 0
c) Total net ar	ea of flood o	penings in A8.b		0.00 sq in	1		
d) Engineered	I flood openir	ngs? Yes 🗵	No				
A9. For a building \	with an attach	ned garage:					
a) Square foot	age of attach	ned garage		500.00 sq ft			
b) Number of	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above ad	jacent grade 0	
c) Total net ar	ea of flood o _l	penings in A9.b		0.00 sq	in		
d) Engineered	flood openin	ngs? ☐ Yes 🕱 N	No				
, ,		• 🗀 🗀					
	SI	ECTION B – FLOOD	INSURA	NCE RATE	MAP (FIRM) INF	ORMATION	•
B1. NFIP Commun Saline County, 050	-	Community Number		B2. County Saline			B3. State Arkansas
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	Elevation(s) e Base Flood Depth)
05125C0240	E	06-05-2020	06-05-2		AE	403.0	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: X FIS Profile FIRM Community Determined Other/Source:							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:							
B12. Is the buildin	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? \sum Yes \omega No						
Designation l	Date:		CBRS	☐ OPA			- -
-				_ _			

			Aprilation Bate: November 60; 2022
IMPORTANT: In these spaces, copy the	corresponding information from Sec	tion A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., U 3420 Hilldale Road	nit, Suite, and/or Bldg. No.) or P.O. Rou	te and Box No.	Policy Number:
City Alexander	State ZIP Arkansas 720		Company NAIC Number
SECTION C -	BUILDING ELEVATION INFORMAT	TION (SURVEY REC	QUIRED)
C1. Building elevations are based on: *A new Elevation Certificate will be	⊠ Construction Drawings* ☐ Buil required when construction of the buildi	ding Under Constructi	ion*
C2. Elevations – Zones A1–A30, AE, Al Complete Items C2.a–h below acco Benchmark Utilized: ArDOT GPS N	ording to the building diagram specified	n Item A7. In Puerto I	
Indicate elevation datum used for th	ne elevations in items a) through h) belo	W.	
☐ NGVD 1929 区 NAVD 1 Datum used for building elevations	988 Other/Source:must be the same as that used for the E	BFE.	
			Check the measurement used.
a) Top of bottom floor (including ba	asement, crawlspace, or enclosure floor		05.0 X feet meters
b) Top of the next higher floor			N/A feet meters
c) Bottom of the lowest horizontal s	structural member (V Zones only)		N/A ☐ feet ☐ meters
d) Attached garage (top of slab)		40	04.0 \boxtimes feet \square meters
e) Lowest elevation of machinery of (Describe type of equipment and	or equipment servicing the building d location in Comments)	40	04.0 \boxtimes feet \square meters
f) Lowest adjacent (finished) grade	e next to building (LAG)	40	04.0 X feet meters
g) Highest adjacent (finished) grad	e next to building (HAG)	i	N/A feet meters
, , , , , , , , , , , , , , , , , , , ,	t elevation of deck or stairs, including	40	04.0 \boxtimes feet \square meters
SECTION D	- SURVEYOR, ENGINEER, OR ARC	CHITECT CERTIFIC	ATION
This certification is to be signed and sea I certify that the information on this Certi statement may be punishable by fine or	ficate represents my best efforts to inter	pret the data available	aw to certify elevation information. e. I understand that any false
Were latitude and longitude in Section A	provided by a licensed land surveyor?	☐ Yes ⊠ No	Check here if attachments.
Certifier's Name	License Number		4000000000
Kazi Islam, PE	20876		STATEOF
Title Civil Engineer, PE			ARKANSAS **
Company Name Hope Consulting			LICENSED PROFESSIONAL ENGINEER
Address 129 North Main Street			ENGINEER *** NO 20876
City	State	ZIP Code	AMPINIU 3
Benton	Arkansas	72015	000000000
Signature	Date	Telephone (501) 315-2626	Ext.
Copy all pages of this Elevation Certificate	and all attachments for (1) community of	ficial, (2) insurance ag	ent/company, and (3) building owner.
Comments (including type of equipment C2e is the elevation of the top of the A/C C2. Exceeding these minimums is encou	pad. The purpose of this elevation cert	ificate is to establish t	he minimum elevations in section

MPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite 3420 Hilldale Road	e, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Number
SECTION E - BUILDING	G ELEVATION INFO	PRMATION (SURVEY NO IE A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Iten complete Sections A, B,and C. For Items E1–E4, enter meters.	ns E1–E5. If the Certif	icate is intended to support	
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the lov			ner the elevation is above or below
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet _ met	ers above or below the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet met	ers above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	ood openings provided	d in Section A Items 8 and/ ☐ feet ☐ met	
E3. Attached garage (top of slab) is			ers above or below the HAG.
E4. Top of platform of machinery and/or equipme servicing the building is	ent 		ers above or below the HAG.
E5. Zone AO only: If no flood depth number is av floodplain management ordinance? Yes			accordance with the community's st certify this information in Section G.
SECTION F - PROPERTY	OWNER (OR OWNE	R'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign he	entative who complete ere. The statements in	s Sections A, B, and E for 2 Sections A, B, and E are c	Zone A (without a FEMA-issued or or or contract to the best of my knowledge.
Property Owner or Owner's Authorized Represent	tative's Name		
Address		City	State ZIP Code
Signature		Date	 Telephone
Comments			
			☐ Check here if attachments.

MPORTANT: In these spaces, copy the corre		FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, St 3420 Hilldale Road	uite, and/or Bldg. N	No.) or P.O. Route and Bo	x No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002		Company NAIC Number	
SECTIO	N G - COMMUN	ITY INFORMATION (OPT	IONAL)		
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comp				
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)					
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 f	for community floodplain n	nanageme	ent purposes.	
G4. Permit Number	G5. Date Permi	t Issued		Date Certificate of Compliance/Occupancy Issued	
G7. This permit has been issued for:] New Construction	on Substantial Improve	ment		
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 loo	cation, per C2(e), i	if applicable)			
				Check here if attachments.	

ELEVATION CERTIFICATE

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, S 3420 Hilldale Road	Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Nur	mber
If using the Elevation Certificate to obtain instructions for Item A6. Identify all photograp "Left Side View." When applicable, photograp vents, as indicated in Section A8. If submitting	NFIP flood insurance, ohs with date taken; "Fro aphs must show the fou	affix at least 2 building ph nt View" and "Rear View"; an undation with representative	d, if required, "Right sexamples of the floo	Side View" and
	Photo	One		
	Photo C	ne		
Photo One Caption				Clear Photo One
	Photo	Two		
Dhata Tina Cantis	Photo T	wo		01 51 : 5
Photo Two Caption				Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

MPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE	COMPANY USE
Building Street Address (including Apt., Unit, Suite, a 3420 Hilldale Road	nd/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	Company NAIC Nu	mber
Alexander	Arkansas	72002		
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View" photographs must show the foundation with represe	; and, if required,	"Right Side View" and "	Left Side View." Wh	en applicable,
	Photo T	hree		
	Photo Thr	ee		
Photo Three Caption				Clear Photo Three
	Photo F	our		
Dhata Farin Continu	Photo Fo	ur		01
Photo Four Caption				Clear Photo Four

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

OMB No. 1660-0008 Expiration Date: November 30, 2022

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 Giron Builders, Inc.					Policy Num	ber:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAI 3420 Hilldale Road					AIC Number:	
City			State		ZIP Code	
Alexander	1 Di di Niverbana Te	7	Arkansas		72002	
Lot 6, Jacob's Corner	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 6, Jacob's Corner					
A4. Building Use (e.g., Resid	dential, Non-Residential,	Addition	, Accessory, e	etc.) Residentia	al	
A5. Latitude/Longitude: Lat	34.392853°N	Long. 9	2.291677°W	Horizonta	l Datum: 🔲 NAD 1	927 × NAD 1983
A6. Attach at least 2 photog	aphs of the building if the	e Certific	:ate is being ບ	ised to obtain floo	d insurance.	
A7. Building Diagram Number	er <u>1A</u>					
A8. For a building with a cra	wlspace or enclosure(s):					
a) Square footage of cra	awlspace or enclosure(s)			0.00 sq ft		
b) Number of permanen	t flood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foot	t above adjacent gra	ade <u>0</u>
c) Total net area of flood	I openings in A8.b		0.00 sq in	1		
d) Engineered flood ope	enings? Yes 🗵 Y	٧o				
A9. For a building with an att	ached garage:					
a) Square footage of atta	ached garage		500.00 sq ft			
b) Number of permanen	t flood openings in the at	tached g	jarage within	1.0 foot above adj	acent grade 0	
c) Total net area of flood	l openings in A9.b		0.00 sq	in		
d) Engineered flood ope	nings? Yes X	No				
	SECTION B _ ELOOD	INCLIDA	NCE DATE	MAD (EIDM) INE	ORMATION	
D4 NEID Community Name	SECTION B – FLOOD	INSURA	†	• • •	ORIVIATION	Do Ctata
B1. NFIP Community Name Saline County, 050191	& Community Number		B2. County Saline			B3. State Arkansas
B4. Map/Panel B5. Suff Number	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	levation(s) e Base Flood Depth)
05125C0240 E	06-05-2020	06-05-2		AE	402.5	
B10 Indicate the source of t	he Base Flood Flevation	(BFF) d	ata or base flo	ood depth entered	Lin Item B9	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: X 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	n a Coastal Barrier Resc	ources S	ystem (CBRS) area or Otherwis	se Protected Area (0	DPA)? ☐ Yes ※ No
Designation Date:		CBRS	□ OPA			
			_			

		'	
IMPORTANT: In these spaces, copy the	corresponding information from Sec	tion A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., U 3420 Hilldale Road	nit, Suite, and/or Bldg. No.) or P.O. Rout	te and Box No.	Policy Number:
City Alexander	State ZIP (Arkansas 7200		Company NAIC Number
SECTION C -	BUILDING ELEVATION INFORMAT	ION (SURVEY RE	QUIRED)
	required when construction of the buildir		
C2. Elevations – Zones A1–A30, AE, Al Complete Items C2.a–h below acco Benchmark Utilized: <u>ArDOT GPS N</u>	ording to the building diagram specified in	n Item A7. In Puerto	
Indicate elevation datum used for th	e elevations in items a) through h) belov	٧.	· ·
☐ NGVD 1929 ⊠ NAVD 1			
Datum used for building elevations i	must be the same as that used for the B	FE.	Check the measurement used.
a) Top of bottom floor (including ba	sement, crawlspace, or enclosure floor)		404.5 ⋉ feet ☐ meters
b) Top of the next higher floor	,		N/A feet meters
c) Bottom of the lowest horizontal s	etructural member (V Zones only)		N/A ☐ feet ☐ meters
d) Attached garage (top of slab)	ductural member (v Zones only)		403.5 X feet meters
e) Lowest elevation of machinery of	r equipment servicing the building		
(Describe type of equipment and	I location in Comments)		403.5 \boxtimes feet \square meters
f) Lowest adjacent (finished) grade	e next to building (LAG)		403.5 X feet meters
g) Highest adjacent (finished) grad	e next to building (HAG)	-	N/A feet meters
 h) Lowest adjacent grade at lowest structural support 	elevation of deck or stairs, including		403.5 × feet meters
SECTION D	– SURVEYOR, ENGINEER, OR ARC	HITECT CERTIFIC	CATION
This certification is to be signed and sea I certify that the information on this Certi statement may be punishable by fine or	ficate represents my best efforts to interp	pret the data availal	law to certify elevation information. ble. I understand that any false
Were latitude and longitude in Section A	provided by a licensed land surveyor?	☐ Yes ⊠ No	Check here if attachments.
Certifier's Name Kazi Islam, PE	License Number 20876		STATE OF
Title	20070		ARKANSAS
Civil Engineer, PE			***
Company Name Hope Consulting			LICENSED PROFESSIONAL ENGINEER
Address			PROFESSIONAL ENGINEER
129 North Main Street			* * *
City	State	ZIP Code	No. 20876
Benton	Arkansas	72015	AMZIDUL
Signature	Date	Telephone (501) 315-2626	Ext.
Copy all pages of this Elevation Certificate	and all attachments for (1) community off	ficial, (2) insurance a	igent/company, and (3) building owner.
Comments (including type of equipment C2e is the elevation of the top of the A/C C2. Exceeding these minimums is encou	pad. The purpose of this elevation certification	ficate is to establish	the minimum elevations in section

MPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite 3420 Hilldale Road	e, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Number
SECTION E - BUILDING	G ELEVATION INFO	PRMATION (SURVEY NO IE A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Iten complete Sections A, B,and C. For Items E1–E4, enter meters.	ns E1–E5. If the Certif	icate is intended to support	
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the lov			ner the elevation is above or below
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet _ met	ers above or below the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet met	ers above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	ood openings provided	d in Section A Items 8 and/ ☐ feet ☐ met	
E3. Attached garage (top of slab) is			ers above or below the HAG.
E4. Top of platform of machinery and/or equipme servicing the building is	ent 		ers above or below the HAG.
E5. Zone AO only: If no flood depth number is av floodplain management ordinance? Yes			accordance with the community's st certify this information in Section G.
SECTION F - PROPERTY	OWNER (OR OWNE	R'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign he	entative who complete ere. The statements in	s Sections A, B, and E for 2 Sections A, B, and E are c	Zone A (without a FEMA-issued or or or contract to the best of my knowledge.
Property Owner or Owner's Authorized Represent	tative's Name		
Address		City	State ZIP Code
Signature		Date	 Telephone
Comments			
			☐ Check here if attachments.

MPORTANT: In these spaces, copy the corre		FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, St 3420 Hilldale Road	uite, and/or Bldg. N	No.) or P.O. Route and Bo	x No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002		Company NAIC Number	
SECTIO	N G - COMMUN	ITY INFORMATION (OPT	IONAL)		
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comp				
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)					
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 f	for community floodplain n	nanageme	ent purposes.	
G4. Permit Number	G5. Date Permi	t Issued		Date Certificate of Compliance/Occupancy Issued	
G7. This permit has been issued for:] New Construction	on Substantial Improve	ment		
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 loo	cation, per C2(e), i	if applicable)			
				Check here if attachments.	

ELEVATION CERTIFICATE

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, S 3420 Hilldale Road	Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Nur	mber
If using the Elevation Certificate to obtain instructions for Item A6. Identify all photograp "Left Side View." When applicable, photograp vents, as indicated in Section A8. If submitting	NFIP flood insurance, ohs with date taken; "Fro aphs must show the fou	affix at least 2 building ph nt View" and "Rear View"; an undation with representative	d, if required, "Right sexamples of the floo	Side View" and
	Photo	One		
	Photo C	ne		
Photo One Caption				Clear Photo One
	Photo	Two		
Dhata Tina Cantis	Photo T	wo		01 51 : 5
Photo Two Caption				Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

MPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE	COMPANY USE
Building Street Address (including Apt., Unit, Suite, a 3420 Hilldale Road	nd/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	Company NAIC Nu	mber
Alexander	Arkansas	72002		
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View" photographs must show the foundation with represe	; and, if required,	"Right Side View" and "	Left Side View." Wh	en applicable,
	Photo T	hree		
	Photo Thr	ee		
Photo Three Caption				Clear Photo Three
	Photo F	our		
Dhata Farin Continu	Photo Fo	ur		01
Photo Four Caption				Clear Photo Four

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

OMB No. 1660-0008 Expiration Date: November 30, 2022

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 Giron Builders, Inc.					Policy Numl	per:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC 3420 Hilldale Road					AIC Number:	
City			State		ZIP Code	
Alexander	LDI- di Niverboro To	· Danaal	Arkansas		72002	
A3. Property Description (Lot Lot 5, Jacob's Corner	and Block Numbers, 18	IX Parcei	Number, Leç	јаі Description, ек	ɔ.) 	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential						
A5. Latitude/Longitude: Lat.	34.392913°N	Long. <u>9</u> 2	2.291673°W	Horizonta	l Datum: 🔲 NAD 1	927 × NAD 1983
A6. Attach at least 2 photogra	phs of the building if the	e Certific	:ate is being ບ	ised to obtain floor	d insurance.	
A7. Building Diagram Number	1A					
A8. For a building with a craw	space or enclosure(s):					
a) Square footage of crav	vlspace or enclosure(s)			0.00 sq ft		
b) Number of permanent	lood openings in the cra	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade <u>0</u>
c) Total net area of flood	openings in A8.b		0.00 sq in	ı		
d) Engineered flood open	ings? Yes X N	10				
A9. For a building with an attac	ched garage:					
a) Square footage of attac	ched garage		500.00 sq ft			
b) Number of permanent	lood openings in the at	tached g	jarage within	1.0 foot above adj	acent grade 0	
c) Total net area of flood	openings in A9.b		0.00 sq	in		
d) Engineered flood open	ngs? Yes X N	10				
	TOTION B. ELOOD	INGLIDA	NOE DATE	MAD (EIDM) INE		
	Community Number	NOUKA	†	• • •	ORMATION	D0 01-1-
B1. NFIP Community Name & Saline County, 050191	Community Number		B2. County Saline			B3. State Arkansas
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
05125C0240 E	06-05-2020	06-05-2		AE	402.6	
B10 Indicate the source of the	e Base Flood Flevation	(BFF) d	ata or base flo	ood depth entered	in Item B9	
	B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: X FIS Profile FIRM Community Determined Other/Source:					
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:						
B12. Is the building located in	a Coastal Barrier Reso	ources Sy	ystem (CBRS) area or Otherwis	e Protected Area (DPA)? ☐ Yes ※ No
Designation Date:	П	CBRS	□ OPA			
			_			

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, and/o 3420 Hilldale Road	Policy Number:						
City Sta Alexander Ari	ate ZIP kansas 720	Code 02	Company NAIC Number				
SECTION C – BUILDING EI	SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1. Building elevations are based on:							
 h) Lowest adjacent grade at lowest elevation of de structural support 	eck or stairs, including		403.6 ⊠ feet ☐ meters				
SECTION D - SURVEYOR	R, ENGINEER, OR ARG	CHITECT CERTIFI	CATION				
This certification is to be signed and sealed by a land su I certify that the information on this Certificate represent statement may be punishable by fine or imprisonment ut. Were latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a land supplied to the latitude and longitude in Section A provided by a land supplied to the latitude and longitude in Section A provided by a land supplied to the latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and longitude in Section A provided by a latitude and latitude	urveyor, engineer, or arc is my best efforts to inter inder 18 U.S. Code, Sec	hitect authorized by rpret the data availa tion 1001.	law to certify elevation information.				
Certifier's Name	License Number		48888				
Kazi Islam, PE	20876		STATE OF				
Title Civil Engineer, PE Company Name Hope Consulting Address 129 North Main Street City Benton	State Arkansas	ZIP Code 72015	ARKANSAS * * * * LICENSED PROFESSIONAL ENGINEER * * * NO. 20876				
Signature	Date	Telephone (501) 315-2626	Ext.				
Copy all pages of this Elevation Certificate and all attachm	ents for (1) community of		agent/company, and (3) building owner.				
Comments (including type of equipment and location, per C2e is the elevation of the top of the A/C pad. The purpor C2. Exceeding these minimums is encouraged.	er C2(e), if applicable)						

MPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite 3420 Hilldale Road	e, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Number
SECTION E - BUILDING	G ELEVATION INFO	PRMATION (SURVEY NO IE A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Iten complete Sections A, B,and C. For Items E1–E4, enter meters.	ns E1–E5. If the Certif	icate is intended to support	
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the lov			ner the elevation is above or below
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet _ met	ers above or below the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet met	ers above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	ood openings provided	d in Section A Items 8 and/ ☐ feet ☐ met	
E3. Attached garage (top of slab) is			ers above or below the HAG.
E4. Top of platform of machinery and/or equipme servicing the building is	ent 		ers above or below the HAG.
E5. Zone AO only: If no flood depth number is av floodplain management ordinance? Yes			accordance with the community's st certify this information in Section G.
SECTION F - PROPERTY	OWNER (OR OWNE	R'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign he	entative who complete ere. The statements in	s Sections A, B, and E for 2 Sections A, B, and E are c	Zone A (without a FEMA-issued or or or contract to the best of my knowledge.
Property Owner or Owner's Authorized Represent	tative's Name		
Address		City	State ZIP Code
Signature		Date	 Celephone
Comments			
			☐ Check here if attachments.

MPORTANT: In these spaces, copy the corre		FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St 3420 Hilldale Road	uite, and/or Bldg. N	No.) or P.O. Route and Bo	x No.	Policy Number:
City Alexander	State Arkansas	ZIP Code 72002		Company NAIC Number
SECTIO	N G - COMMUN	ITY INFORMATION (OPT	IONAL)	
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comp			
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)				
G2. A community official completed Section or Zone AO.	on E for a building	g located in Zone A (withou	ut a FEMA	A-issued or community-issued BFE)
G3. The following information (Items G4–	G10) is provided f	for community floodplain n	nanageme	ent purposes.
G4. Permit Number	G5. Date Permi	t Issued		Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:] New Construction	on Substantial Improve	ment	
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 loo	cation, per C2(e), i	if applicable)		
				Check here if attachments.

ELEVATION CERTIFICATE

See Instructions for Item A6.

MPORTANT: In these spaces, copy the corr	responding information	from Section A.	FOR INSURANCE	COMPANY USE
Building Street Address (including Apt., Unit, S 3420 Hilldale Road	Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Nur	mber
If using the Elevation Certificate to obtain instructions for Item A6. Identify all photograp "Left Side View." When applicable, photograp vents, as indicated in Section A8. If submitting	NFIP flood insurance, ohs with date taken; "Fro aphs must show the fou	affix at least 2 building ph nt View" and "Rear View"; an undation with representative	d, if required, "Right sexamples of the floo	Side View" and
	Photo	One		
	Photo C	ne		
Photo One Caption				Clear Photo One
	Photo	Two		
Dhata Tina Cantis	Photo T	wo		01 51 : 5
Photo Two Caption				Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

IMPORTANT: In these spaces, copy the correspon	from Section A.	FOR INSURANCE	COMPANY USE	
Building Street Address (including Apt., Unit, Suite, a 3420 Hilldale Road	nd/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	Company NAIC Nu	mber
Alexander	Arkansas	72002		
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View" photographs must show the foundation with represe	; and, if required,	"Right Side View" and "	Left Side View." Wh	en applicable,
	Photo T	hree		
	Photo Thr	ee		
Photo Three Caption				Clear Photo Three
	Photo F	our		
Dhata Farin Continu	Photo Fo	ur		01
Photo Four Caption				Clear Photo Four

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

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

Important: 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 INSUI	RANCE COMPANY USE	
A1. Building Owner's Name Giron Builders, Inc.					Policy Num	ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3420 Hilldale Road					Company N	IAIC Number:	
City State ZIP Code Alexander Arkansas 72002							
A3. Property Desc Lot 4, Jacob's Corr	•	nd Block Numbers, Ta	x Parcel	Number, Leç	gal Description, e	tc.)	
A4. Building Use (e.g., Resider	ntial, Non-Residential,	Addition	, Accessory,	etc.) Residenti	al	
A5. Latitude/Longi	tude: Lat. <u>3</u>	4.392972°N	Long. 92	2.291674°W	Horizonta	al Datum: NAD	1927 🗵 NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being ι	sed to obtain floo	od insurance.	
A7. Building Diagra	am Number	1A					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of craw	lspace or enclosure(s)			0.00 sq ft		
b) Number of p	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foo	t above adjacent gr	ade 0
c) Total net ar	ea of flood o	penings in A8.b		0.00 sq in	1		
d) Engineered	l flood openir	ngs? Yes 🗵	No.				
A9. For a building v	vith an attacl	ned garage:					
a) Square foot	age of attach	ned garage		500.00 sq ft			
b) Number of p	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above ad	jacent grade 0	
c) Total net ar	ea of flood o	penings in A9.b		0.00 sq	in		
d) Engineered	flood opening	ngs? ☐ Yes 🕱 N	10				
	SI	ECTION B – FLOOD	INSURA	NCE RATE	MAP (FIRM) IN	ORMATION	
B1. NFIP Commun Saline County, 050	-	Community Number		B2. County Saline			B3. State Arkansas
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	Elevation(s) e Base Flood Depth)
05125C0240	E	06-05-2020	06-05-2		AE	403.0	
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 X NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?							
Designation l	Date:		CBRS	☐ OPA			_

			Aprilation Bate: November 60; 2022	
IMPORTANT: In these spaces, copy the	corresponding information from Sec	tion A.	FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., U 3420 Hilldale Road	nit, Suite, and/or Bldg. No.) or P.O. Rou	te and Box No.	Policy Number:	
City Alexander	State ZIP Arkansas 720		Company NAIC Number	
SECTION C -	BUILDING ELEVATION INFORMAT	TION (SURVEY REC	QUIRED)	
C1. Building elevations are based on: *A new Elevation Certificate will be	⊠ Construction Drawings* ☐ Buil required when construction of the buildi	ding Under Constructi	ion*	
C2. Elevations – Zones A1–A30, AE, Al Complete Items C2.a–h below acco Benchmark Utilized: ArDOT GPS N	ording to the building diagram specified	n Item A7. In Puerto I		
Indicate elevation datum used for th	ne elevations in items a) through h) belo	W.		
☐ NGVD 1929 区 NAVD 1 Datum used for building elevations	988 Other/Source:must be the same as that used for the E	BFE.		
			Check the measurement used.	
a) Top of bottom floor (including ba	asement, crawlspace, or enclosure floor		05.0 X feet meters	
b) Top of the next higher floor			N/A feet meters	
c) Bottom of the lowest horizontal s	structural member (V Zones only)		N/A ☐ feet ☐ meters	
d) Attached garage (top of slab)		40	04.0 \boxtimes feet \square meters	
e) Lowest elevation of machinery of (Describe type of equipment and	or equipment servicing the building d location in Comments)	40	04.0 \boxtimes feet \square meters	
f) Lowest adjacent (finished) grade	e next to building (LAG)	40	04.0 X feet meters	
g) Highest adjacent (finished) grad	e next to building (HAG)	i	N/A feet meters	
, , , , , , , , , , , , , , , , , , , ,	t elevation of deck or stairs, including	40	04.0 \boxtimes feet \square meters	
SECTION D	- SURVEYOR, ENGINEER, OR ARC	CHITECT CERTIFIC	ATION	
This certification is to be signed and sea I certify that the information on this Certi statement may be punishable by fine or	ficate represents my best efforts to inter	pret the data available	aw to certify elevation information. e. I understand that any false	
Were latitude and longitude in Section A	provided by a licensed land surveyor?	☐ Yes ⊠ No	Check here if attachments.	
Certifier's Name	License Number		4000000000	
Kazi Islam, PE	20876		STATEOF	
Title Civil Engineer, PE			ARKANSAS **	
Company Name Hope Consulting			LICENSED PROFESSIONAL ENGINEER	
Address 129 North Main Street			ENGINEER *** NO 20876	
City	State	ZIP Code	AMPINIU 3	
Benton	Arkansas	72015	000000000	
Signature	Date	Telephone (501) 315-2626	Ext.	
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 C2e is the elevation of the top of the A/C C2. Exceeding these minimums is encou	pad. The purpose of this elevation cert	ificate is to establish t	he minimum elevations in section	

MPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite 3420 Hilldale Road	e, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Number
SECTION E - BUILDING	G ELEVATION INFO	PRMATION (SURVEY NO IE A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Iten complete Sections A, B,and C. For Items E1–E4, enter meters.	ns E1–E5. If the Certif	icate is intended to support	
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the lov			ner the elevation is above or below
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet _ met	ers above or below the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet met	ers above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	ood openings provided	d in Section A Items 8 and/ ☐ feet ☐ met	
E3. Attached garage (top of slab) is			ers above or below the HAG.
E4. Top of platform of machinery and/or equipme servicing the building is	ent 		ers above or below the HAG.
E5. Zone AO only: If no flood depth number is av floodplain management ordinance? Yes			accordance with the community's st certify this information in Section G.
SECTION F - PROPERTY	OWNER (OR OWNE	R'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign he	entative who complete ere. The statements in	s Sections A, B, and E for 2 Sections A, B, and E are c	Zone A (without a FEMA-issued or or or contract to the best of my knowledge.
Property Owner or Owner's Authorized Represent	tative's Name		
Address		City	State ZIP Code
Signature		Date	 Celephone
Comments			
			☐ Check here if attachments.

MPORTANT: In these spaces, copy the corre		FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St 3420 Hilldale Road	uite, and/or Bldg. N	No.) or P.O. Route and Bo	x No.	Policy Number:
City Alexander	State Arkansas	ZIP Code 72002		Company NAIC Number
SECTIO	N G - COMMUN	ITY INFORMATION (OPT	IONAL)	
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comp			
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)				
G2. A community official completed Section or Zone AO.	on E for a building	g located in Zone A (withou	ut a FEMA	A-issued or community-issued BFE)
G3. The following information (Items G4–	G10) is provided f	for community floodplain n	nanageme	ent purposes.
G4. Permit Number	G5. Date Permi	t Issued		Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:] New Construction	on Substantial Improve	ment	
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 loo	cation, per C2(e), i	if applicable)		
				Check here if attachments.

ELEVATION CERTIFICATE

See Instructions for Item A6.

MPORTANT: In these spaces, copy the corr	responding information	from Section A.	FOR INSURANCE	COMPANY USE
Building Street Address (including Apt., Unit, S 3420 Hilldale Road	Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Nur	mber
If using the Elevation Certificate to obtain instructions for Item A6. Identify all photograp "Left Side View." When applicable, photograp vents, as indicated in Section A8. If submitting	NFIP flood insurance, ohs with date taken; "Fro aphs must show the fou	affix at least 2 building ph nt View" and "Rear View"; an undation with representative	d, if required, "Right sexamples of the floo	Side View" and
	Photo	One		
	Photo C	ne		
Photo One Caption				Clear Photo One
	Photo	Two		
Dhata Tina Cantis	Photo T	wo		01 51 : 5
Photo Two Caption				Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

IMPORTANT: In these spaces, copy the correspon	from Section A.	FOR INSURANCE	COMPANY USE	
Building Street Address (including Apt., Unit, Suite, a 3420 Hilldale Road	nd/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	Company NAIC Nu	mber
Alexander	Arkansas	72002		
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View" photographs must show the foundation with represe	; and, if required,	"Right Side View" and "	Left Side View." Wh	en applicable,
	Photo T	hree		
	Photo Thr	ee		
Photo Three Caption				Clear Photo Three
	Photo F	our		
Dhata Farin Continu	Photo Fo	ur		01
Photo Four Caption				Clear Photo Four

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

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

Important: 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 INSU	RANCE COMPANY USE		
A1. Building Owner's Name Giron Builders, Inc.					Policy Num	ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3420 Hilldale Road					Company N	NAIC Number:	
City Alexander				State Arkansa	s	ZIP Code 72002	
A3. Property Desc Lot 3, Jacob's Corr	. ,	nd Block Numbers, Ta	ax Parcel	Number, Leç	gal Description, e	tc.)	
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential						
A5. Latitude/Longi	tude: Lat. <u>3</u>	4.393030°N	Long. 92	2.291672°W	Horizonta	al Datum: NAD	1927 × NAD 1983
A6. Attach at least	: 2 photograp	hs of the building if the	e Certific	ate is being ເ	used to obtain floo	od insurance.	
A7. Building Diagra	am Number	1A					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of craw	lspace or enclosure(s)			0.00 sq ft		
b) Number of p	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foo	t above adjacent gr	ade 0
c) Total net ar	ea of flood o	penings in A8.b		0.00 sq in	1		
d) Engineered	I flood openir	ngs? Yes 🗓	No				
A9. For a building v	vith an attach	ned garage:					
a) Square foot	age of attach	ned garage		500.00 sq ft			
b) Number of p	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above ad	jacent grade 0	
c) Total net an	ea of flood o _l	penings in A9.b		0.00 sq	in		
d) Engineered	flood openin	ngs? ☐ Yes 🕱 N	No				
, ,	,	• 🗀 🛅					
	SI	ECTION B – FLOOD	INSURA	NCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Commun Saline County, 050	-	Community Number		B2. County Saline			B3. State Arkansas
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	Elevation(s) le Base Flood Depth)
05125C0240	Е	06-05-2020	06-05-2		AE	403.3	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: X FIS Profile							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X 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 l	Date:		CBRS	☐ OPA			_ _
				_ _			

		•	Expiration Bato: November 60, 2022
IMPORTANT: In these spaces, copy the o	orresponding information from Sect	ion A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Uni 3420 Hilldale Road	t, Suite, and/or Bldg. No.) or P.O. Rout	e and Box No.	Policy Number:
City Alexander	State ZIP C Arkansas 7200		Company NAIC Number
SECTION C - I	BUILDING ELEVATION INFORMAT	ON (SURVEY RE	QUIRED)
*A new Elevation Certificate will be re	equired when construction of the building	•	
C2. Elevations – Zones A1–A30, AE, AH Complete Items C2.a–h below accord Benchmark Utilized: ArDOT GPS Ne	ding to the building diagram specified ir	Item A7. In Puerto	
Indicate elevation datum used for the	elevations in items a) through h) below	<i>1</i> .	
☐ NGVD 1929 ⊠ NAVD 19			
Datum used for building elevations m	ust be the same as that used for the BI	-E.	Check the measurement used.
a) Top of bottom floor (including bas	ement, crawlspace, or enclosure floor)		405.3 ⋉ feet ☐ meters
b) Top of the next higher floor			N/A feet meters
c) Bottom of the lowest horizontal sti	ructural member (V Zones only)		N/A feet meters
d) Attached garage (top of slab)	detaila member (v Zenes emy)		U4.3 x feet meters
e) Lowest elevation of machinery or (Describe type of equipment and leavest and leaves).	equipment servicing the building ocation in Comments)		104.3 ⊠ feet ☐ meters
f) Lowest adjacent (finished) grade	•	4	104.3 ⋉ feet
g) Highest adjacent (finished) grade			N/A ☐ feet ☐ meters
h) Lowest adjacent grade at lowest e structural support	,		104.3 × feet meters
SECTION D -	SURVEYOR, ENGINEER, OR ARC	HITECT CERTIFIC	CATION
This certification is to be signed and seale I certify that the information on this Certific statement may be punishable by fine or in	cate represents my best efforts to intern	ret the data availab	law to certify elevation information. ble. I understand that any false
Were latitude and longitude in Section A բ	provided by a licensed land surveyor?	☐ Yes ⊠ No	Check here if attachments.
Certifier's Name Kazi Islam, PE	License Number 20876		CTATEOD
Title	20070		
Civil Engineer, PE			ARKANSAS ***
Company Name Hope Consulting			LICENSED PROFESSIONAL
Address 129 North Main Street			LICENSED PROFESSIONAL ENGINEER
City	State	ZIP Code	No. 20876
Benton	Arkansas	72015	AMZIDUL
Signature	Date	Telephone (501) 315-2626	Ext.
Copy all pages of this Elevation Certificate a	and all attachments for (1) community off	cial, (2) insurance a	gent/company, and (3) building owner.
Comments (including type of equipment a C2e is the elevation of the top of the A/C p C2. Exceeding these minimums is encour	oad. The purpose of this elevation certif	icate is to establish	the minimum elevations in section

MPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite 3420 Hilldale Road	e, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Number
SECTION E - BUILDING	G ELEVATION INFO	PRMATION (SURVEY NO IE A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Iten complete Sections A, B,and C. For Items E1–E4, enter meters.	ns E1–E5. If the Certif	icate is intended to support	
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the lov			ner the elevation is above or below
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet _ met	ers above or below the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet met	ers above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	ood openings provided	d in Section A Items 8 and/ ☐ feet ☐ met	
E3. Attached garage (top of slab) is			ers above or below the HAG.
E4. Top of platform of machinery and/or equipme servicing the building is	ent 		ers above or below the HAG.
E5. Zone AO only: If no flood depth number is av floodplain management ordinance? Yes			accordance with the community's st certify this information in Section G.
SECTION F - PROPERTY	OWNER (OR OWNE	R'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign he	entative who complete ere. The statements in	s Sections A, B, and E for 2 Sections A, B, and E are c	Zone A (without a FEMA-issued or or or contract to the best of my knowledge.
Property Owner or Owner's Authorized Represent	tative's Name		
Address		City	State ZIP Code
Signature		Date	 Celephone
Comments			
			☐ Check here if attachments.

MPORTANT: In these spaces, copy the corre		FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, St 3420 Hilldale Road	uite, and/or Bldg. N	No.) or P.O. Route and Bo	x No.	Policy Number:			
City Alexander	State Arkansas	ZIP Code 72002		Company NAIC Number			
SECTIO	N G - COMMUN	ITY INFORMATION (OPT	IONAL)				
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comp						
	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation						
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 f	for community floodplain n	nanageme	ent purposes.			
G4. Permit Number	G5. Date Permi	t Issued		Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:] New Construction	on Substantial Improve	ment				
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 loo	cation, per C2(e), i	if applicable)					
				Check here if attachments.			

ELEVATION CERTIFICATE

See Instructions for Item A6.

MPORTANT: In these spaces, copy the corr	from Section A.	FOR INSURANCE	COMPANY USE	
Building Street Address (including Apt., Unit, S 3420 Hilldale Road	Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Nur	mber
If using the Elevation Certificate to obtain instructions for Item A6. Identify all photograp "Left Side View." When applicable, photograp vents, as indicated in Section A8. If submitting	NFIP flood insurance, ohs with date taken; "Fro aphs must show the fou	affix at least 2 building ph nt View" and "Rear View"; an undation with representative	d, if required, "Right sexamples of the floo	Side View" and
	Photo	One		
	Photo C	ne		
Photo One Caption				Clear Photo One
	Photo	Two		
Dhata Tina Cantis	Photo T	wo		01 51 : 5
Photo Two Caption				Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

IMPORTANT: In these spaces, copy the correspon	from Section A.	FOR INSURANCE	COMPANY USE	
Building Street Address (including Apt., Unit, Suite, a 3420 Hilldale Road	nd/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	Company NAIC Nu	mber
Alexander	Arkansas	72002		
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View" photographs must show the foundation with represe	; and, if required,	"Right Side View" and "	Left Side View." Wh	en applicable,
	Photo T	hree		
	Photo Thr	ee		
Photo Three Caption				Clear Photo Three
	Photo F	our		
Dhata Farin Continu	Photo Fo	ur		01
Photo Four Caption				Clear Photo Four

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

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

Important: 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 Giron Builders, Inc.					Policy Num	ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.3420 Hilldale Road					Company N	IAIC Number:	
City Alexander				State Arkansa	S	ZIP Code 72002	
A3. Property Desc Lot 2, Jacob's Corr	•	nd Block Numbers, Ta	ax Parcel	Number, Leç	gal Description, et	cc.)	
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential						
A5. Latitude/Longit	tude: Lat. <u>3</u>	4.393089°N	Long. 92	2.291675°W	Horizonta	al Datum: 🔲 NAD	1927 × NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being ι	sed to obtain floo	d insurance.	
A7. Building Diagra	am Number	1A					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of craw	space or enclosure(s)			0.00 sq ft		
b) Number of p	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foo	t above adjacent gra	ade 0
c) Total net ar	ea of flood o	penings in A8.b		0.00 sq in	1		· · · · · · · · · · · · · · · · · · ·
d) Engineered	flood openir	ngs? Yes 🗵	No				
A9. For a building v	vith an attach	ned garage:					
a) Square foot	age of attach	ned garage		500.00 sq ft			
b) Number of p	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above ad	jacent grade 0	
c) Total net are	ea of flood o _l	penings in A9.b		0.00 sq	in		
d) Engineered	flood openin	igs? ☐ Yes 🕱 N	No				
, ,	•	•					
	SI	CTION B – FLOOD	INSURA	NCE RATE	MAP (FIRM) INF	ORMATION	•
B1. NFIP Commun Saline County, 050	-	Community Number		B2. County Saline			B3. State Arkansas
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	Elevation(s) e Base Flood Depth)
05125C0240	E	06-05-2020	06-05-2		AE	403.8	
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 X NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?							
Designation I	Date:		CBRS	☐ OPA		·	
				_			

IMPORTANT: In these spaces, copy the corresponding i	tion A.	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or I 3420 Hilldale Road	Bldg. No.) or P.O. Rou	te and Box No.	Policy Number:				
City State Alexander Arkar		Code 02	Company NAIC Number				
SECTION C – BUILDING ELE	VATION INFORMAT	ION (SURVEY RE	EQUIRED)				
C1. Building elevations are based on:	nstruction of the building (E, V1–V30, V (with Blood in the building diagram specified in the latest part of the Blood in the building in the building in the building in the building in the Blood in t	FE), AR, AR/A, AR// n Item A7. In Puerto NAVD 1988 w.	AE, AR/A1–A30, AR/AH, AR/AO. O Rico only, enter meters. Check the measurement used. 405.8				
structural support			404.8 X feet meters				
This certification is to be signed and sealed by a land surv I certify that the information on this Certificate represents a statement may be punishable by fine or imprisonment und	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. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.						
Certifier's Name Kazi Islam, PE Title Civil Engineer, PE Company Name Hope Consulting Address 129 North Main Street City Benton Signature	State Arkansas Date	ZIP Code 72015 Telephone	ARKANSAS *** LICENSED PROFESSIONAL ENGINEER *** NO. 20876 AMZIDUL Ext.				
	1.6.74	(501) 315-2626	(/				
Copy all pages of this Elevation Certificate and all attachments (including type of equipment and location, per C2e is the elevation of the top of the A/C pad. The purpose C2. Exceeding these minimums is encouraged.	C2(e), if applicable)						

MPORTANT: In these spaces, copy the corresp	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite 3420 Hilldale Road	e, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Number
SECTION E - BUILDING	G ELEVATION INFO	PRMATION (SURVEY NO IE A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Iten complete Sections A, B,and C. For Items E1–E4, enter meters.	ns E1–E5. If the Certif	icate is intended to support	
E1. Provide elevation information for the following the highest adjacent grade (HAG) and the lov			ner the elevation is above or below
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet _ met	ers above or below the HAG.
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet met	ers above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flo the next higher floor (elevation C2.b in the diagrams) of the building is	ood openings provided	d in Section A Items 8 and/ ☐ feet ☐ met	
E3. Attached garage (top of slab) is			ers above or below the HAG.
E4. Top of platform of machinery and/or equipme servicing the building is	ent 		ers above or below the HAG.
E5. Zone AO only: If no flood depth number is av floodplain management ordinance? Yes			accordance with the community's st certify this information in Section G.
SECTION F - PROPERTY	OWNER (OR OWNE	R'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign he	entative who complete ere. The statements in	s Sections A, B, and E for 2 Sections A, B, and E are c	Zone A (without a FEMA-issued or or or contract to the best of my knowledge.
Property Owner or Owner's Authorized Represent	tative's Name		
Address		City	State ZIP Code
Signature		Date	 Celephone
Comments			
			☐ Check here if attachments.

MPORTANT: In these spaces, copy the corre		FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, St 3420 Hilldale Road	uite, and/or Bldg. N	No.) or P.O. Route and Bo	x No.	Policy Number:			
City Alexander	State Arkansas	ZIP Code 72002		Company NAIC Number			
SECTIO	N G - COMMUN	ITY INFORMATION (OPT	IONAL)				
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comp						
	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation						
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 f	for community floodplain n	nanageme	ent purposes.			
G4. Permit Number	G5. Date Permi	t Issued		Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:] New Construction	on Substantial Improve	ment				
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 loo	cation, per C2(e), i	if applicable)					
				Check here if attachments.			

ELEVATION CERTIFICATE

See Instructions for Item A6.

MPORTANT: In these spaces, copy the corr	from Section A.	FOR INSURANCE	COMPANY USE	
Building Street Address (including Apt., Unit, S 3420 Hilldale Road	Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:	
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Nur	mber
If using the Elevation Certificate to obtain instructions for Item A6. Identify all photograp "Left Side View." When applicable, photograp vents, as indicated in Section A8. If submitting	NFIP flood insurance, ohs with date taken; "Fro aphs must show the fou	affix at least 2 building ph nt View" and "Rear View"; an undation with representative	d, if required, "Right sexamples of the floo	Side View" and
	Photo	One		
	Photo C	ne		
Photo One Caption				Clear Photo One
	Photo	Two		
Dhata Tina Cantis	Photo T	wo		01 51 : 5
Photo Two Caption				Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

IMPORTANT: In these spaces, copy the correspon	from Section A.	FOR INSURANCE	COMPANY USE	
Building Street Address (including Apt., Unit, Suite, a 3420 Hilldale Road	nd/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City	State	ZIP Code	Company NAIC Nu	mber
Alexander	Arkansas	72002		
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View" photographs must show the foundation with represe	; and, if required,	"Right Side View" and "	Left Side View." Wh	en applicable,
	Photo T	hree		
	Photo Thr	ee		
Photo Three Caption				Clear Photo Three
	Photo F	our		
Dhata Farin Continu	Photo Fo	ur		01
Photo Four Caption				Clear Photo Four

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

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

Important: 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 Giron Builders, Inc.					Policy Num	ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3420 Hilldale Road					Company N	IAIC Number:	
City State ZIP Code Alexander Arkansas 72002							
A3. Property Desc Lot 1, Jacob's Corr		nd Block Numbers, Ta	ax Parcel	Number, Leç	gal Description, et	cc.)	
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential						
A5. Latitude/Longi	tude: Lat. <u>3</u>	4.393150°N	Long. 92	2.291675°W	Horizonta	al Datum: 🔲 NAD	1927 🗵 NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being ι	sed to obtain floo	d insurance.	
A7. Building Diagra	am Number	1A					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of craw	space or enclosure(s)			0.00 sq ft		
b) Number of p	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foo	t above adjacent gra	ade 0
c) Total net ar	ea of flood o	penings in A8.b		0.00 sq in	1		
d) Engineered	l flood openir	ngs? 🗌 Yes 🗷 N	No				
A9. For a building v	vith an attach	ned garage:					
a) Square foot	age of attach	ned garage		500.00 sq ft			
b) Number of p	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above ad	jacent grade 0	
c) Total net ar	ea of flood o _l	penings in A9.b		0.00 sq	in		
d) Engineered	flood openin	igs? ☐ Yes 🕱 N	No				
	SE	ECTION B - FLOOD	INSURA	NCE RATE	MAP (FIRM) INF	ORMATION	-
B1. NFIP Community Name & Community Number Saline County, 050191 B2. County Name Saline Arkansas							
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	Elevation(s) e Base Flood Depth)
05125C0240	E	06-05-2020	06-05-2		AE	404.0	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: Image: State of the Base Flood Elevation (BFE) data or base flood Elevat							
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 Date: CBRS DPA							

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or 3420 Hilldale Road	Policy Number:					
City State Alexander Arka	e ZIP ansas 720	Code 02	Company NAIC Number			
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1. Building elevations are based on:						
structural support			405.0 X feet meters			
SECTION D – SURVEYOR, This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und Were latitude and longitude in Section A provided by a lice	veyor, engineer, or ard my best efforts to inte der 18 U.S. Code, Sed	chitect authorized by rpret the data availa stion 1001.	law to certify elevation information.			
Certifier's Name Kazi Islam, PE Title Civil Engineer, PE Company Name Hope Consulting Address 129 North Main Street City Benton Signature	State Arkansas Date	ZIP Code 72015 Telephone (501) 315-2626	ARKANSAS *** LICENSED PROFESSIONAL ENGINEER ** NO. 20876 AMZIDUL Ext.			
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(e), if applicable) C2e is the elevation of the top of the A/C pad. The purpose of this elevation certificate is to establish the minimum elevations in section C2. Exceeding these minimums is encouraged.						

MPORTANT: In these spaces, copy the correspon	FOR INSURA	NCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, a 3420 Hilldale Road	and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number	r:		
City Alexander	State Arkansas	ZIP Code 72002	Company NAI	C Number		
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 m	eters	r 🔲 below the HAG.		
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet m	eters	r 🗌 below the LAG.		
E2. For Building Diagrams 6–9 with permanent floor the next higher floor (elevation C2.b in the diagrams) of the building is	d openings provide			–2 of Instructions), r □ below the HAG.		
E3. Attached garage (top of slab) is		feet m	eters 🔲 above o	r Delow the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is			eters 🔲 above o	r ☐ below the HAG.		
E5. Zone AO only: If no flood depth number is availa floodplain management ordinance? Yes		ne bottom floor elevated in own. The local official m				
SECTION F - PROPERTY O	WNER (OR OWNE	R'S REPRESENTATIVE) CERTIFICATION			
The property owner or owner's authorized represent community-issued BFE) or Zone AO must sign here.	ative who complete . The statements in	es Sections A, B, and E fo Sections A, B, and E are	r Zone A (without a correct to the best	FEMA-issued or of my knowledge.		
Property Owner or Owner's Authorized Representati	ive's Name					
Address		City	State	ZIP Code		
Signature		Date	Telephone			
Comments						
			Chock	here if attachments.		

MPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, St 3420 Hilldale Road	uite, and/or Bldg. N	No.) or P.O. Route and Bo	x No.	Policy Number:		
City Alexander	State Arkansas	ZIP Code 72002		Company NAIC Number		
SECTIO	N G - COMMUN	ITY INFORMATION (OPT	IONAL)			
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Comp					
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 or Zone AO.	on E for a building	g located in Zone A (withou	ut a FEMA	A-issued or community-issued BFE)		
G3. The following information (Items G4–	G10) is provided f	for community floodplain n	nanageme	ent purposes.		
G4. Permit Number	G5. Date Permi	t Issued		Date Certificate of Compliance/Occupancy Issued		
G7. This permit has been issued for:] New Construction	on Substantial Improve	ment			
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 loo	cation, per C2(e), i	if applicable)				
				Check here if attachments.		

ELEVATION CERTIFICATE

See Instructions for Item A6.

MPORTANT: In these spaces, copy the corr	FOR INSURANCE	COMPANY USE		
Building Street Address (including Apt., Unit, S 3420 Hilldale Road	Policy Number:			
City Alexander	State Arkansas	ZIP Code 72002	Company NAIC Nur	mber
If using the Elevation Certificate to obtain instructions for Item A6. Identify all photograp "Left Side View." When applicable, photograp vents, as indicated in Section A8. If submitting	NFIP flood insurance, ohs with date taken; "Fro aphs must show the fou	affix at least 2 building ph nt View" and "Rear View"; an undation with representative	d, if required, "Right sexamples of the floo	Side View" and
	Photo	One		
	Photo C	ne		
Photo One Caption				Clear Photo One
	Photo	Two		
Dhata Tina Cantis	Photo T	wo		01 51 : -
Photo Two Caption				Clear Photo Two

ELEVATION CERTIFICATE

Continuation Page

IMPORTANT: In these spaces, copy the correspon	FOR INSURANCE	COMPANY USE			
Building Street Address (including Apt., Unit, Suite, a 3420 Hilldale Road	nd/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:		
City	State	ZIP Code	Company NAIC Nu	mber	
Alexander	Arkansas	72002			
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 TI	hree			
	Photo Thre	ee			
Photo Three Caption				Clear Photo Three	
	Photo F	our			
Dhata Farin Continu	Photo Fou	ır		01 7: : -	
Photo Four Caption				Clear Photo Four	