

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077  
Expires December 31, 2006

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

<b>SECTION A - PROPERTY OWNER INFORMATION</b>		For Insurance Company Use:
BUILDING OWNER'S NAME Sanchez Construction LLC		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Not Assigned as of this date		Company NAIC Number
CITY Cheyenne	STATE WY	ZIP CODE
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 7, Block One, Carver Subdivision		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential		
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-##" or ##.####')	HORIZONTAL DATUM: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Cheyenne 560029		B2. COUNTY NAME Laramie		B3. STATE WY	
B4. MAP AND PANEL NUMBER 0655	B5. SUFFIX E	B6. FIRM INDEX DATE 11-15-77	B7. FIRM PANEL EFFECTIVE/REVISED DATE 3-2-94	B8. FLOOD ZONE(S) A & X	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 6010.3

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  
 FIS Profile  FIRM  Community Determined  Other (Describe): Allison Creek Master Plan

B11. Indicate the elevation datum used for the BFE in B9:  NGVD 1929  NAVD 1988  Other (Describe): \_\_\_\_\_

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No Designation Date \_\_\_\_\_

**SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)**

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 2 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

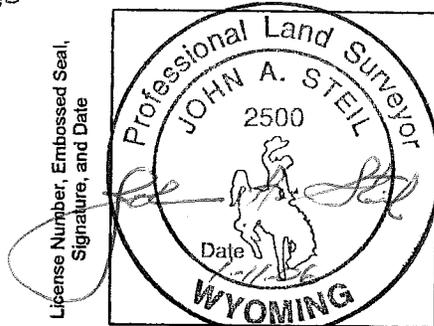
C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO

Complete items C3.-a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum \_\_\_\_\_ Conversion/Comments \_\_\_\_\_ City of Cheyenne Control Mon. "College"

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

- a) Top of bottom floor (including basement or enclosure) 6044.9 ft(m)
- b) Top of next higher floor 6021.4 ft(m)
- c) Bottom of lowest horizontal structural member (V zones only) N/A ft(m)
- d) Attached garage (top of slab) 6011.4 ft(m)
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) N/A ft(m)
- f) Lowest adjacent (finished) grade (LAG) 6019.1 ft(m)
- g) Highest adjacent (finished) grade (HAG) 6019.1 ft(m)
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade None
- i) Total area of all permanent openings (flood vents) in C3.h 0 sq. in. (sq. cm)



**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.  
I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.  
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME John A. Steil	LICENSE NUMBER WY PLS 2500
TITLE Professional Land Surveyor	COMPANY NAME Steil Surveying Services LLC
ADDRESS PO Box 2073	CITY Cheyenne
SIGNATURE <i>John A. Steil</i>	STATE WY
	ZIP CODE 82003
	DATE 1-11-06
	TELEPHONE 307-634-7273

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.			Policy Number
CITY	STATE	ZIP CODE	Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

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

**COMMENTS**

City of Cheyenne Control Monument "College" is a 3" brass cup in concrete located  
 0.2<sup>mi/2</sup> East of LCCC in the southerly R/W. of College Drive  
 Elevation ~~60675~~ NGVD 1929  
 6001.75

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number \_\_ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is \_\_ ft.(m) \_\_ in.(cm)  above or  below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is \_\_ ft.(m) \_\_ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is \_\_ ft.(m) \_\_ in.(cm)  above or  below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For Zone AO only. If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  
 Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, C, and E are correct to the best of my knowledge.*

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ TELEPHONE \_\_\_\_\_

COMMENTS \_\_\_\_\_

Check here if attachments

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1.  The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.  A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3.  The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

LOCAL OFFICIAL'S NAME \_\_\_\_\_ TITLE \_\_\_\_\_

COMMUNITY NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

COMMENTS \_\_\_\_\_

Check here if attachments

House

LARAMIE COUNTY/CHEYENNE REGIONAL BUILDING DEPARTMENT - PERMIT APPLICATION

CALL BEFORE YOU DIG! 1-800-348-1030 IT'S THE LAW!

BPME 05-500988

PLAN REVIEW NUMBER		05-500987		PERMIT & ZONING CERTIFICATE NUMBER			
RECEIVED BY	DATE	PLAN REVIEW	CHECK #	CASH	PERMIT	CHECK #	CASH
	PKD 12/29/05					155	
VALUATION OF WORK		146,900.00		INVESTIGATION FEE		Z1, \$50.00	
PLAN REVIEW FEE		15.00		OTHER FEES			
PERMIT FEE		1013.04		TOTAL FEES		1078.04	
JOB ADDRESS				TRACT SIZE		M374	
SUBDIVISION			BLOCK NUMBER		LOT NUMBER		
Carver			1		7		
OWNER		MAILING ADDRESS		ZIP CODE		PHONE NUMBER	
Stephanie Court, LLC		213 W 18th St.		82001		634-2840	
CONTRACTOR		MAILING ADDRESS		ZIP CODE			
Panchev Construction, LLC		3121 Butch Cassidy Trail		82009			
PHONE		LICENSE #		CLASS			
634-2840		060011112		A			
ARCHITECT ENGINEER		MAILING ADDRESS		PHONE NUMBER			
USE OF BUILDING		CHANGE OF USE FROM		TO			
Residential							
Class of Work							
New <input checked="" type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Remodel <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Installation <input type="checkbox"/> Remove <input type="checkbox"/> Demolish <input type="checkbox"/>							
DETAILED DESCRIPTION OF WORK							
3 bed 2 ba 2 car det garage / FUB w/ bath rough							
Lawn Sprinklers		Temporary Power Pole		Permit/Plan Review Conditions			
Front <input type="checkbox"/> Back <input type="checkbox"/> Both <input type="checkbox"/>		<input type="checkbox"/> Additional Fee \$30.00		use MP Name: <del>Stephanie</del> "stph1"			
Vented Gas Log One		Jetted Hot Tub		MP# 05-500987			
1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>		1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>					
Type of Construction		Occupancy Group/Division		Number of Stories		Use Zone	
New				1		MM-2	
Size of Building Sq Ft		Basement		Garage		Other	
First Story 1483		1483		517			
SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING, HEATING, VENTILATING, OR AIR CONDITIONING IF NOT INCLUDED IN THIS PERMIT THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT ALL PROVISIONS OR LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OF THE PERFORMANCE OR CONSTRUCTION, OR GUARANTEE ISSUANCE OF A WELL AND SEPTIC PERMIT							
OWNER Signature		PLUMBING		Rock Solid		LICENSE #	
CONTRACTOR Signature		ELECTRICAL		BAT Electric		LICENSE #	
OTHER		MECHANICAL		Mister B'S		LICENSE #	
FOR OFFICE USE ONLY							
Special Flood Hazard Area Approved By		Date		County Only Board of County Commissioners Approved By		Date	
CJ				[Signature]		1-12-06	
Address Assigned By		Date		Plans Approved By		Date	
1127 Stephanie Ct		11/2/06		[Signature]			
Development/Zoning Approved By		Date		Card Issued By		Date	
CJ				[Signature]			
Fire Department Approved By		Date		Date Tap Fees Paid		Date	
Approved For Issue By		Date		Date Permit Issued		Date	

Do you need a Quick Start Foundation Permit?

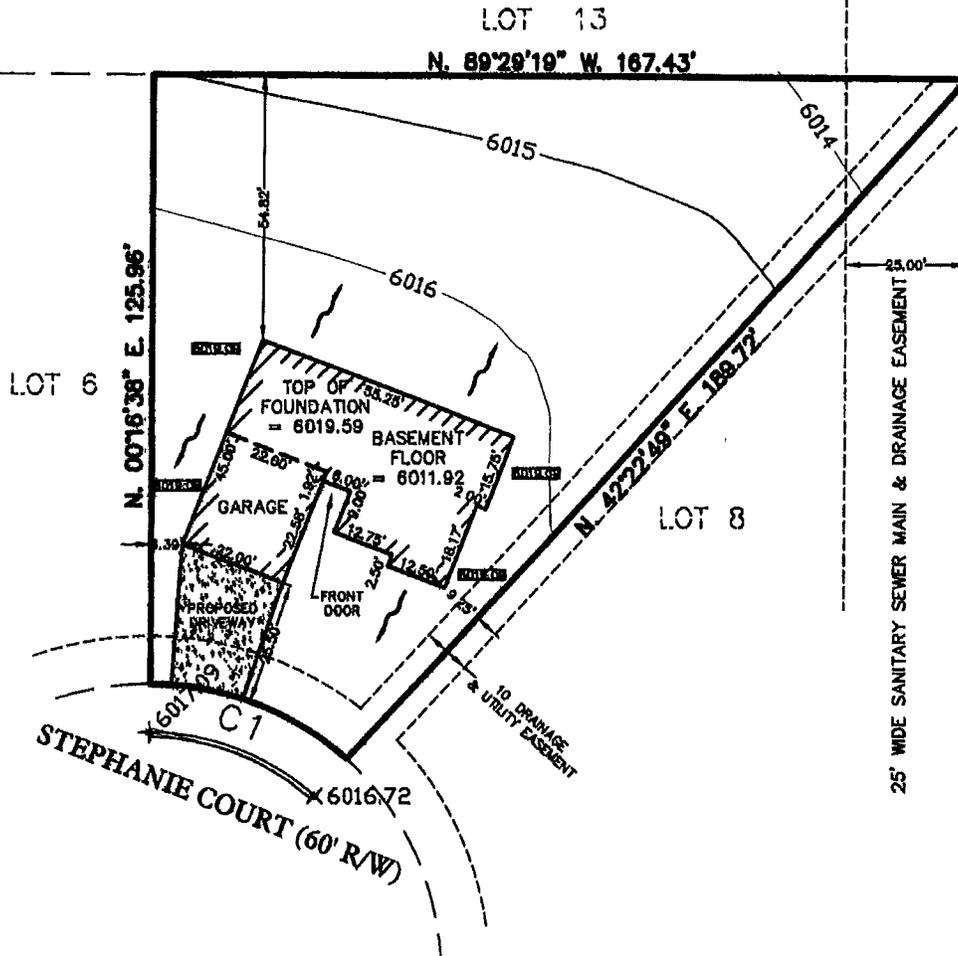
IS NOT Required to complete 2-119c on Elex east for finished construction New FEMA mapping shows Carver Sub NOT IN the 100-yr flood plain

RECEIVED

FILE COPY

DEC 29 2005

BUILDING DEPARTMENT



CURVE TABLE

NUMBER	DELTA ANGLE	CHORD DIRECTION	TANGENT	RADIUS	ARC LENGTH	CHORD LENGTH
C1	42°08'11"	N 68°40'16" W	23.09	80.00	44.09	43.10

NOTE

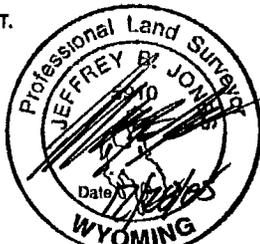
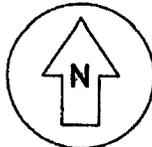
SITE GRADING AND DRAINAGE IS IN CONFORMANCE WITH THE APPROVED GRADING OR DRAINAGE PLAN FOR THE SUBJECT SUBDIVISION IF SAID PLAN IS EXISTING.

TBM = TOP OF CURB BETWEEN LOTS 6 & 7  
 ASSUMED ELEV. = 6017.09'  
 ZONED MR-2  
 LOT = 14,374 SQ. FT.

 Drainage arrow  
 00.0 Existing elevation  
 00.0 Proposed elevation

PLOT PLAN  
 FOR  
 LOT 7, BLOCK ONE  
 CARVER SUBDIVISION  
 LARAMIE COUNTY, WYOMING.

Date prepared: 12-19-05



0 30  
 Scale: 1" = 30'



**STEEL SURVEYING SERVICES, LLC**  
 REGISTERED LAND SURVEYORS  
 1108 WEST 19th STREET P.O. BOX 8076  
 CHEYENNE, WY. 82003 PH(307)494-7870