

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME G.M. MAGER		For Insurance Company Use	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1810 South 1st Ave		Policy Number	Company NAIC Number
CITY Cheyenne,	STATE Wyoming	ZIP CODE 82007	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 26 of Block 5 Orchard Valley			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Garage, DETACHED			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###.###" or ##.#####") N 41° 06' 04" W 104° 48' 40"	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input checked="" 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 560029 0655E		B2. COUNTY NAME Laramie		B3. STATE WYOMING	
B4. MAP AND PANEL NUMBER 655	B5. SUFFIX E	B6. FIRM INDEX DATE E 1994	B7. FIRM PANEL EFFECTIVE/REVISED DATE R MAR 1994	B8. FLOOD ZONE(S) A	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 6024.0

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

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

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

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 1 (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 **NGVD 1929** Conversion/Comments

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

a) Top of bottom floor (including basement or enclosure) **6023** . **2** ft. (m)

b) Top of next higher floor _____ . _____ ft. (m)

c) Bottom of lowest horizontal structural member (V zones only) _____ . _____ ft. (m)

d) Attached garage (top of slab) _____ . _____ ft. (m)

e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) _____ . _____ ft. (m)

f) Lowest adjacent (finished) grade (LAG) **6023** . **6** ft. (m)

g) Highest adjacent (finished) grade (HAG) **6024** . **0** ft. (m)

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

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

License Number, Embossed Seal, Signature, and Date



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: **Larry T. Perry L.S.** LICENSE NUMBER: **WYOMING L.S. 3047**

TITLE: **OWNER** COMPANY NAME: **Terrestrial Surveying & Mapping Co.**

ADDRESS: **1127 Terry Ranch Rd.** CITY: **Cheyenne** STATE: **Wyoming** ZIP CODE: **82007**

SIGNATURE: **Larry T. Perry L.S.** DATE: _____ TELEPHONE: **307-634-9360**

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

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:
BUILDING OWNER'S NAME G.M. MAGEE		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1810 S. 1st AVE		Company NAIC Number
CITY CHEYENNE	STATE WYOMING	ZIP CODE 82007
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 26 of Block 5 ORCHARD VALLEY		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) GARAGE		
LATITUDE/LONGITUDE (OPTIONAL) (##° -##' -###" or ##.#####)	HORIZONTAL DATUM: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input checked="" type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other
N 41° 06' 04" W 105° 40' 48"		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 560029 0655E	B2. COUNTY NAME LARAMIE	B3. STATE WYOMING
B4. MAP AND PANEL NUMBER G55	B5. SUFFIX E	B6. FIRM INDEX DATE E 1994
B7. FIRM PANEL EFFECTIVE/REVISED DATE 2 MAR 1994	B8. FLOOD ZONE(S) A	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 6024.0

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

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

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
 Designation Date: **N/A**

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

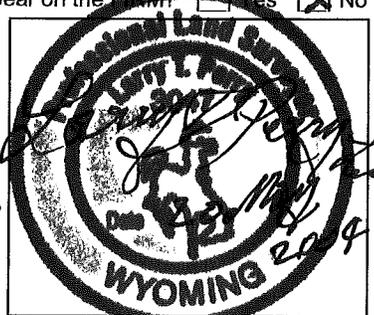
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number **1** (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 _____

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

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	6025'	0	ft.(m)
<input type="checkbox"/> b) Top of next higher floor	N/A		ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	N/A		ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	N/A		ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.)	N/A		ft.(m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	6022	0	ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	6024	0	ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	N/A		
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h	N/A		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
LARRY T. PERRY L.S.

TITLE
OWNER

COMPANY NAME
TERRESTRIAL SURVEYING & MAPPING CO.

ADDRESS
1127 TERRY RANCH ROAD

CITY
CHEYENNE

STATE
WYO.

ZIP CODE
82007

SIGNATURE
[Signature]

DATE
20 May 2009

TELEPHONE
307-634-9360

LICENSE NUMBER
63047

IMPORTANT: In these spaces, copy the corresponding information from Section A.		For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1810 5 1st AVE		Policy Number
CITY CHEYENNE	STATE WYOMING	ZIP CODE 82007
		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

Elevation derived from City of Cheyenne DATA "ORCHARD" & "GREELEY"
 Allison Drew Drainage MASTER Plan Nov. 1986 100 yr. Flood
 plane derived from Table 2~4 btwn. Sta. 290+00 & 294+30
 Determined as 6024.0 ft

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 E5. 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



Mail

ZONING/ADDRESS APPLICATION

LARAMIE COUNTY PLANNING DEPARTMENT

310 W 19TH STREET SUITE 400

CHEYENNE, WY 82001 (307) 633-4303 FAX (307) 633-4519



* FLOOD HAZARD AREA *

ATTACH COPY OF PROPERTY DEED AND PLOT PLAN OF STRUCTURE AND SITE INCLUDING:

- () Property lines (lot size) () Surrounding roads () Well and Septic location () Location of structure on property
- () Setback distances () Exterior dimensions () Driveway location () Other existing structures () North arrow

Application For: Zoning Certificate [] Rural Address (Outside Zoned Area)

Application Date 4-21-04

Certificate No. 04-5003292C ^{MS}

Applicant G. M. MAGEE Telephone 634-6945

Mailing Address 819 E allison cheyenne wy 82004

Owner (if different from Applicant) _____

Application to: Place : HUD ___ UBC ___ OTHER X Build [] Residential [] Accessory Commercial []*

Structure Type GARAGE Structure Size 952 Sq. Ft. *See Site plan requirements for commercial

Will this structure have water and sewer services? Yes [] No

Lot Size 1/4 x 1/8 Acres 20520 Sq. Ft. Estimated Cost of Structure \$ 10,000.00

Estimated Completion Date _____ Location of Structure Staked: [] Yes [] No-Call When Location Is Staked.

Legal Description

Lot Split _____ Lot 26 Block/Tract 5 Subdivision Orchard Valley 1st Filing
Division _____ Section 18 Township 13N Range 166W

G. M. Magee 4-21-04
Signature of Applicant Date

Applicant certifies that the above information is true and correct to the best of his/her knowledge.

Zoning District MR-1 Map Page # 032A Floodplain Development Permit yes Firm Map _____

Notes/Conditions See # 03-50071

Site Address 1810 S. First Ave. New? _____

Applicant shall place house number on the structure and/or at driveway. Numbers shall be a minimum of 6" high and shall be of a reflective material. Contact U S Post Office for mailbox location.

Status approved BOARD OF COUNTY COMMISSIONERS by Cathy H.

This certificate is issued subject to full compliance with the terms of the application and the zoning regulations and/or addressing. The issuance of this certificate/address does not guarantee issuance of a well or a small wastewater permit.

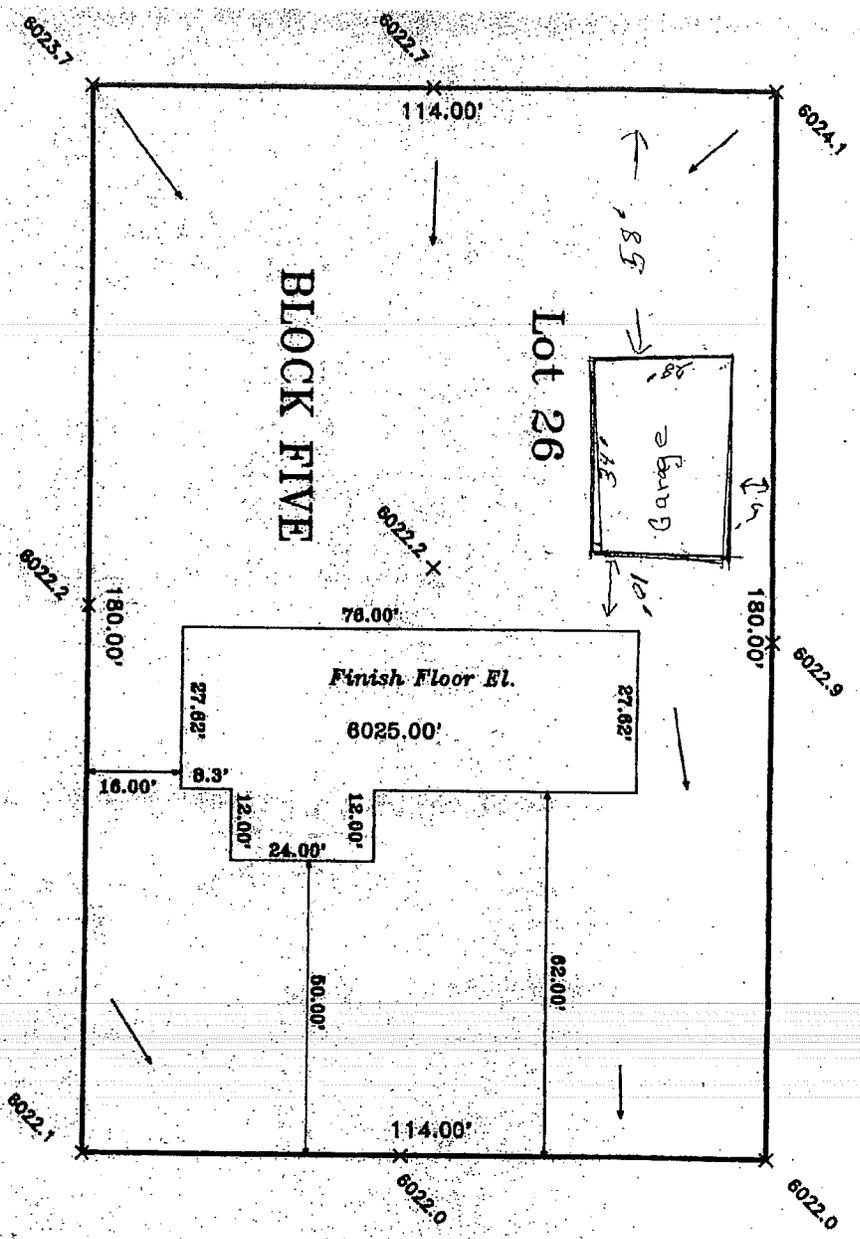
Issue Date 5/2/04 Expiration date _____ Certificate must be renewed if construction is not started by this date.

Receipt No. _____ Amount \$ 35.00 GIS Entry _____ Final Inspection _____

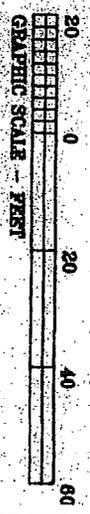
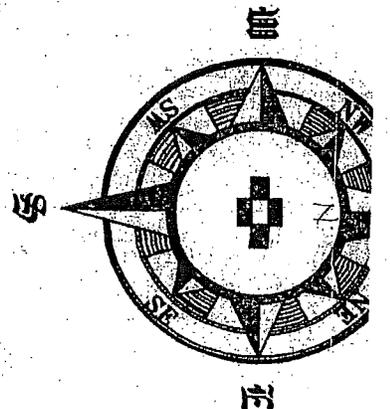
application/02/27/02

1054 555 4-22-04

100 year flood plane was determined to be at 6024.0 feet above mean level datum, more or less.



South First Avenue



RECEIVED
APR 2 2 2004

CITY OF CHEYENNE
BUILDING DEPARTMENT

FILE COPY

Lot 26
Block Five
Orchard Va.
1st filing
12/12/04

BUILD