

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-8.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>LARRY SLOAN</u>		For Insurance Company Use: Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>1902 AVENUE C</u>		Company NAIC Number
City <u>CHEYENNE</u> State <u>WY</u> ZIP Code <u>82007</u>		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>TRACK 16, WALLICK AND MURRAY GARDENS</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>GARAGE</u>		
A5. Latitude/Longitude: Lat. <u>41-05-59</u> Long. <u>102-47-27</u>		Horizontal Datum: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>1</u>		
A8. For a building with a crawl space or enclosure(s), provide		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) _____ sq ft		a) Square footage of attached garage _____ sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq in		c) Total net area of flood openings in A9.b _____ sq in

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

B1. NFIP Community Name & Community Number <u>LARAMIE COUNTY 560029 0655E</u>		B2. County Name <u>LARAMIE</u>		B3. State <u>WYOMING</u>	
B4. Map/Panel Number <u>655</u>	B5. Suffix <u>E</u>	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date <u>MARCH 2, 1994</u>	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>5997.8</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in item B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input checked="" type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

## 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. 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 C2.a-g below according to the building diagram specified in item A7.  
Benchmark Utilized ALLISON Vertical Datum 5993.36  
Conversion/Comments \_\_\_\_\_

Check the measurement used.

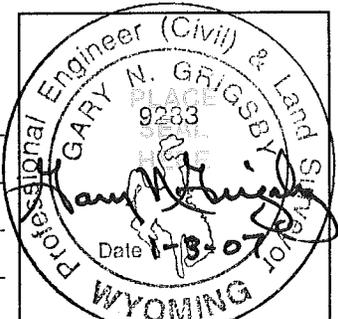
a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>5998.5</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>5997.4</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>5998.1</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

## 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.

Check here if comments are provided on back of form.

Certifier's Name GARY N. GRIGSBY License Number PELS 9283  
Title PRESIDENT Company Name WESTERN RESEARCH&DEVELOPMENT  
Address 5908 YELLOWSTONE RD. City CHEYENNE State WY ZIP Code 82009  
Signature [Signature] Date 01/07/2007 Telephone (307) 632-5656



<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. 1902 AVENUE C	Policy Number
City CHEYENNE State WY 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 STATION 48+00 OF TABLE 2-4 PAGE 2-10 OF THE DRAINAGE MASTER PLAN OF ALLISON CREEK DATED NOVEMBER, 1988 WAS USED TO DETERMINE THE BASE FLOOD ELEVATION.

Signature  Date 12-15-2007  Check here if attachments

**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, crawl space, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.  
 b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

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

The property owner or owner's authorized representative who completes Sections A, B, 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, 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. Check the measurement used in Items G8. and G9.

- 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 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 _____
-------------------------	------------------------------	---

- G7. This permit has been issued for:  New Construction  Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____
Comments _____	

Check here if attachments

# Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1902 AVENUE C	For Insurance Company Use: Policy Number
City CHEYENNE State WY ZIP Code 82007	Company NAIC Number
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.	

VIEW; NORTH SIDE OF BUILDING  
PHOTO TAKEN 1-07-2007



# Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1902 AVENUE C	For Insurance Company Use: Policy Number
City CHEYENNE State WY ZIP Code 82007	Company NAIC Number
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."	

VIEW FROM SOUTHWEST CORNER OF BUILDING; WEST SIDE AND SOUTH SIDE OF BUILDING  
PHOTO TAKEN 1-07-2007



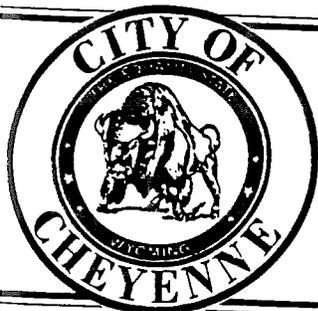
# Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1902 AVENUE C	For Insurance Company Use:
	Policy Number
City CHEYENNE State WY ZIP Code 82007	Company NAIC Number
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.	

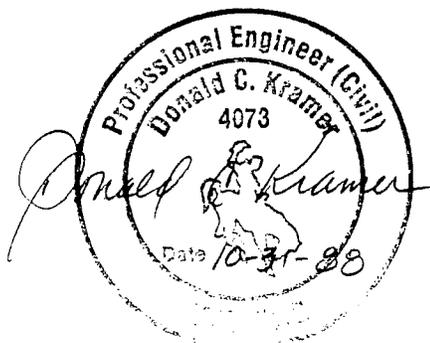
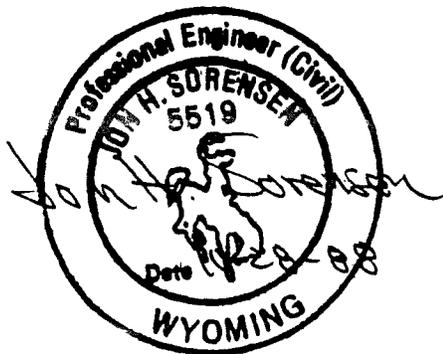
VIEW FROM SOUTHEAST CORNER OF BUILDING; SOUTH SIDE AND WEST SIDE OF BUILDING  
PHOTO TAKEN 1-07-2007





Drainage Master Plan  
**Allison Creek**

November 1988



- States West Water Resources
- Eagle Consultants
- Intermountain Professional Services



000040

Table 2-4  
(Continued)

100-Year

Design Point	Location	Section	Discharge (cfs)	Water Surface Elevation (ft)
E7	E. College Drive	34+20	1,880	5,996.4
		40+00	1,800	5,997.4
		48+00	1,800	5,997.8
		51+50	1,800	5,998.2
E6	Murray Road	52+50	1,800	5,998.5
		54+00	1,200	6,000.0
		58+00	1,200	6,001.9
		62+50	1,200	6,004.3
		67+00	1,200	6,006.9
E3	Abandoned Railroad Grade	75+30	1,120	6,008.8
		75+50	1,120	6,010.2
E1	Upstream of Abandoned Railroad Grade	80+00	1,120	6,012.9
		84+00	1,120	6,015.6
<u>Artesian Road Tributary</u>				
E5	Murray Road	0+00	650	5,998.2
		1+00	650	5,998.5
		5+00	650	6,000.0
		8+00	650	6,001.5
		11+00	650	6,002.5
		14+50	650	6,003.5

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077  
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:
BUILDING OWNER'S NAME Sloan, Lacey		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1902 Ave C		Company NAIC Number	
CITY Cheyenne	STATE WY	ZIP CODE 82007	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tract 16 Wallick & Murray Gardens			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##"##" or ##"####") 41° 05' 59.49006N 102° 47' 26.75791W		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 WGS84	
		SOURCE: <input checked="" type="checkbox"/> GPS (Type): LEICA 1200 <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Laramie County, Wyoming 560029		B2. COUNTY NAME Laramie County		B3. STATE Wyoming	
B4. MAP AND PANEL NUMBER 560029 0655E	B5. SUFFIX	B6. FIRM INDEX DATE 9/27/91	B7. FIRM PANEL EFFECTIVE/REVISED DATE 3/2/94	B8. FLOOD ZONE(S) zone	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flood) 5997.8
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input checked="" type="checkbox"/> Other (Describe): see attached					
B11. Indicate the elevation datum used for the BFE in B9: <input type="checkbox"/> NAVD 1988 <input checked="" type="checkbox"/> Other (Describe): see attached					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Data _____					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

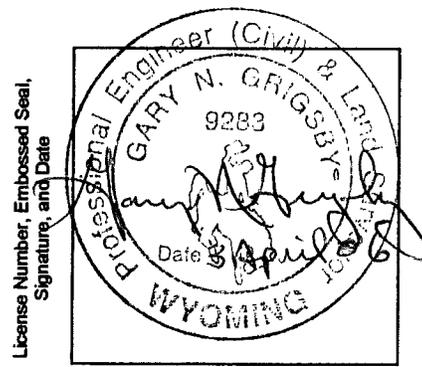
C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number \_ (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 city cont Conversion/Comments see attached

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

- o a) Top of bottom floor (including basement or enclosure) \_\_\_\_\_ ft.(m)
- o b) Top of next higher floor \_\_\_\_\_ ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) \_\_\_\_\_ ft.(m)
- o d) Attached garage (top of slab) \_\_\_\_\_ ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) \_\_\_\_\_ ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) 6005.09 ft.(m)
- o g) Highest adjacent (finished) grade (HAG) 6007.32 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade \_\_\_\_\_
- o i) Total area of all permanent openings (flood vents) in C3.h \_\_\_\_\_ 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 Gary N. Grigsby LICENSE NUMBER 9283

TITLE PE LS COMPANY NAME Western Research and Development

ADDRESS 5908 Yellowstone Rd suite B CITY Cheyenne STATE WY ZIP CODE 82009

SIGNATURE [Signature] DATE 4/2/06 TELEPHONE 307-632-5656

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

1902 Avenue C

CITY  
Cheyenne

STATE  
WY

ZIP CODE  
82007

For Insurance Company Use:

Policy Number

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

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. 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

Gary N. Grigsby PE LS Western Research and Development

ADDRESS

5908 Yellowstone Road suite B

CITY

Cheyenne

STATE

WY

ZIP CODE

82009

SIGNATURE

DATE

4/2/06

TELEPHONE

307-632-5656

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
-------------------	------------------------	---

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



# ZONING/ADDRESS APPLICATION

LARAMIE COUNTY PLANNING DEPARTMENT  
310 W 19TH STREET SUITE 400  
CHEYENNE, WY 82001 (307) 633-4303 FAX (307)633-4519



**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

Application Date MAR. 13, 06

Certificate No. 016-500146

Applicant Larry E. SLOAN Telephone 632-9135

Mailing Address 1902 Ave C Cheyenne, Wyoming 82007

Owner (if different from Applicant) \_\_\_\_\_

Application to: Place : HUD \_\_\_ UBC \_\_\_ OTHER \_\_\_ Build [ ] Residential  Accessory  Commercial [ ]\*

Structure Type MORTON BUILDING Structure Size 40x60 Sq. Ft. \*See Site plan requirements for commercial

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

Lot Size 5 Acres \_\_\_\_\_ Sq. Ft. Estimated Cost of Structure \$ 50,000.00

Address for: [ ] Existing Structure [ ] Temporary Address ( Septic, Power, Other \_\_\_\_\_ )

Date of Estimated Start of Residential Construction 7-10-06

**Legal Description**

Lot Split \_\_\_\_\_ Lot \_\_\_\_\_ Block/Tract 16 Subdivision Wallick & Murray Gardens

Division \_\_\_\_\_ Section 17 Township 13 N Range 66 W

Margaret M Sloan 3/13/06  
Signature of Applicant Date

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

\*\*\*\*\*

Zoning District L1 Map Page # 0134 Floodplain Development Permit YES Firm Map \_\_\_\_\_

Notes/Conditions \_\_\_\_\_

Site Address 1902 Avenue C New NO

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 4-3-06 Expiration date \_\_\_\_\_ Certificate must be renewed if construction is not started by this date.

Receipt No. \_\_\_\_\_ Amount \$ \_\_\_\_\_ GIS Entry \_\_\_\_\_ Final Inspection \_\_\_\_\_

IN 3/13/06