

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:	
BUILDING OWNER'S NAME Bruce Denby			Policy Number	
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1917 So. 1st Ave.			Company NAIC Number	
CITY Cheyenne	STATE WY	ZIP CODE 82007		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 9, Block 1, Orchard Valley Addition				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Accessory				
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###.###" or ##.#####°)		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input checked="" 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 560029		B2. COUNTY NAME Laramie		B3. STATE Wyoming	
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) 6023.4

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 Drainage 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 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

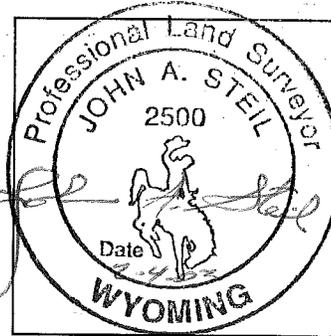
Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided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

Datum 1929 Conversion/Comments _____

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

- a) Top of bottom floor (including basement or enclosure) 6024.2 ft.(m)
- b) Top of next higher floor NA ft.(m)
- c) Bottom of lowest horizontal structural member (V zones only) NA ft.(m)
- d) Attached garage (top of slab) NA ft.(m)
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) NA ft.(m)
- f) Lowest adjacent (finished) grade (LAG) 6023.8 ft.(m)
- g) Highest adjacent (finished) grade (HAG) 6023.9 ft.(m)
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 0
- i) Total area of all permanent openings (flood vents) in C3.h 0 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 John A. Steil		LICENSE NUMBER PLS 2500	
TITLE Professional Land Surveyor	COMPANY NAME Steil Surveying Services LLC		
ADDRESS P.O. Box 2073	CITY Cheyenne	STATE WY	ZIP CODE 82003
SIGNATURE 	DATE 2-4-03	TELEPHONE 307-634-7273	

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.			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

The BFE was determined from Allison Creek Drainage Master Plan dated November 1988 Figure 7-3 Water Surface Profile

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 _____

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

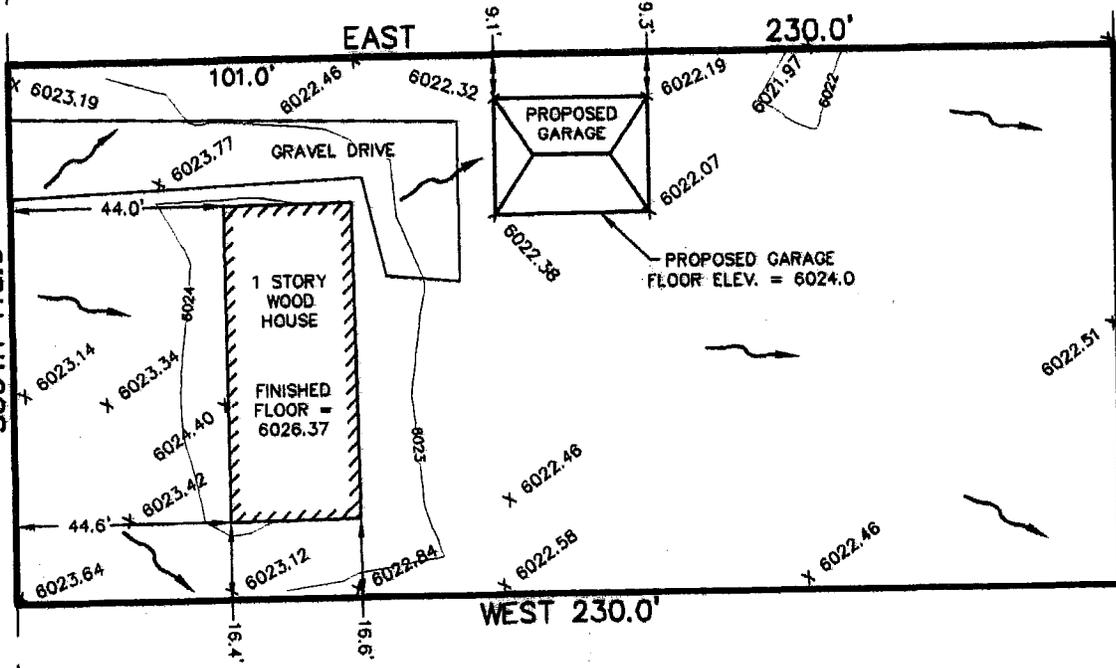
SOUTH FIRST AVENUE (50' R/W)

LOT 22

LOT 21

SOUTH 113.0'

NORTH 113.0'



LOT 10

LOT 11

TBM = TOP OF ARROW ON FIRE HYDRANT
ON WEST SIDE OF STREET NEAR
2010 SOUTH FIRST AVENUE
ELEV. = 6026.38'

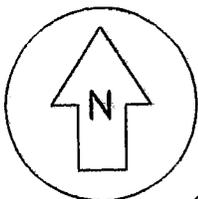
NOTE: THE 100 YEAR FLOOD PLAIN ELEVATION
ACCORDING TO THE DRAINAGE MASTER
PLAN PREPARED NOVEMBER 1988 FOR
ALLISON CREEK IS INTERPOLATED TO BE
AT ELEVATION 6023.0

ZONED MR-1

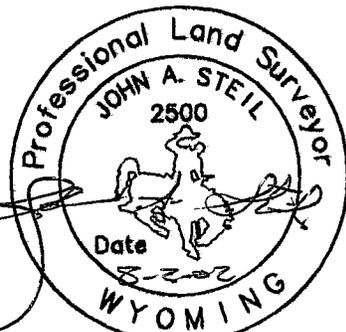
LOT = 25,990 SQ. FT.

~ Drainage arrow

X 6000.00 Existing elevation



0 40
Scale: 1" = 40'



PLOT PLAN
FOR
LOT 9, BLOCK 1,
ORCHARD VALLEY ADDITION
LARAMIE COUNTY, WYOMING.

Date prepared: 8-1-02



STEIL SURVEYING SERVICES, LLC
REGISTERED LAND SURVEYORS

1102 WEST 19th STREET P.O. BOX 2073
CHEYENNE, WY. 82003 PH(307)634-7273



ZONING/ADDRESS APPLICATION

LARAMIE COUNTY PLANNING DEPARTMENT

310 W 19TH STREET SUITE 400
CHEYENNE, WY 82001 (307) 633-4303



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 9-9-02

Certificate No. 8275

Applicant Dalmae Construction

Telephone 635-2575

Mailing Address P.O. Box 6234 Cheyenne WY 82003

Owner (if different from Applicant) Bruce Denby

Application to: Place Build Residential Accessory Commercial *See Site plan requirements for commercial

A Lester Building Structure Size 24x32 Sq. Ft. Number of Structures 1

Will this structure have water and sewer services? Yes No

Lot Size _____ Acres 25,990 Sq. Ft. Estimated Cost of Structure \$ 15,000.00

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

Legal Description

Lot Split 16-15-02 Lot 9 Block/Tract 1 Subdivision Orchard Valley
Division _____ Section _____ Township _____ Range _____

[Signature] 9-9-02
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 # D13ab Floodplain Development Permit Yes Firm Map 655
Notes/Conditions See 6063. elec cert to be submitted

Site Address 1917 S. First Ave New? No

Applicant shall place house number on the structure and/or at driveway. Contact U S Post Office for mailbox location.

Status Approved BOARD OF COUNTY COMMISSIONERS by Cathy Weatherington

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 9-10-02 Expiration date 12-31-02 Certificate must be renewed if construction is not started by this date.

Receipt No. 633759 Amount \$ 35 GIS Entry _____ Final Inspection _____