

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>Norman Mullikin</u>		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>802 E Allison Road</u>		Policy Number
City <u>Cheyenne</u> State <u>WY</u> ZIP Code <u>82007</u>		Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>Sunridge South, 2nd filing, Lots 20 and 21 block 1</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>residential</u>		
A5. Latitude/Longitude: Lat. <u>N 41°06'34"</u> Long. <u>W 104°47'24"</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) <u>NA</u> sq ft		a) Square footage of attached garage <u>960</u> sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>NA</u>		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>0</u>
c) Total net area of flood openings in A8.b <u>NA</u> sq in		c) Total net area of flood openings in A9.b <u>0</u> sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>560029 0655E</u>		B2. County Name <u>Laramie</u>		B3. State <u>WY</u>	
B4. Map/Panel Number <u>0655</u>	B5. Suffix <u>E</u>	B6. FIRM Index Date <u>1994</u>	B7. FIRM Panel Effective/Revised Date <u>2MAR94</u>	B8. Flood Zone(s) <u>A</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>5996.4</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 City Control Vertical Datum NGVD 29
Conversion/Comments _____

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor) _____ feet meters (Puerto Rico only)

b) Top of the next higher floor 5996.2 feet meters (Puerto Rico only)

c) Bottom of the lowest horizontal structural member (V Zones only) _____ feet meters (Puerto Rico only)

d) Attached garage (top of slab) 5996.2 feet meters (Puerto Rico only)

e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) NA _____ feet meters (Puerto Rico only)

f) Lowest adjacent (finished) grade (LAG) 5994.2 feet meters (Puerto Rico only)

g) Highest adjacent (finished) grade (HAG) 5994.3 feet 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.

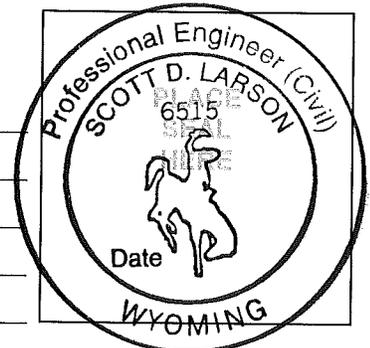
Check here if comments are provided on back of form.

Certifier's Name Scott D. Larson License Number 6515

Title President Company Name Benchmark Engineers

Address 1920 Thomes Avenue City Cheyenne State WY ZIP Code 82001

Signature [Signature] Date 11/13/06 Telephone (307)634-9064



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. 802 E Allison Road	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 Flood Plain was determined from Allison Draw Drainage Plan Nov. 1988 page 2-8, Table 2-4

 Signature	11/13/06 Date
<input type="checkbox"/> 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			
<input type="checkbox"/> 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



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			For Insurance Company Use:
BUILDING OWNER'S NAME Donald D. Schumacker			Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 807 East Allison Road			Company NAIC Number
CITY Cheyenne	STATE Wyoming	ZIP CODE 82007	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax ID No. 11083008600011			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) accessory (Garage)			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.###" or ##.####") N41°06'34" W104°47'24"		HORIZONTAL DATUM: X NAD 1927 <input type="checkbox"/> NAD 1983	
		SOURCE: <input type="checkbox"/> GPS (Type): _____ <input checked="" 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 0655	B5. SUFFIX E	B6. FIRM INDEX DATE 1994	B7. FIRM PANEL EFFECTIVE/REVISED DATE 2MAR94	B8. FLOOD ZONE(S) A	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 5996.4

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): _____

B11. Indicate the elevation datum used for the BFE in B9: X 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 _____

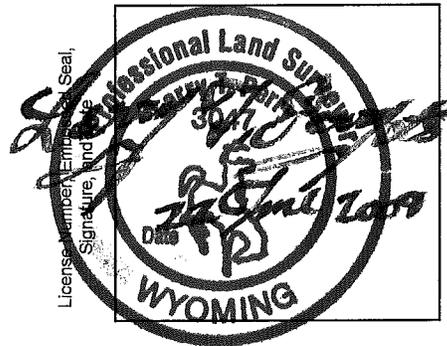
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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 ___ (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 NAVD1929 Conversion/Comments NONE
 Elevation reference mark used ALLISON Does the elevation reference mark used appear on the FIRM? Yes No

- ▶ a) Top of bottom floor (including basement or enclosure) _____ ft.(m)
- ▶ b) Top of next higher floor _____ ft.(m)
- ▶ c) Bottom of lowest horizontal structural member (V zones only) N/A. ft.(m)
- ▶ d) Attached garage (top of slab) N/A. 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) 5994. ft.(m)
- ▶ g) Highest adjacent (finished) grade (HAG) 5994. 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)



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 LS 3047

TITLE Land Surveyor	COMPANY NAME Terrestrial Surveying & Mapping Co.		
ADDRESS 1127 Terry Ranch Road	CITY Cheyenne	STATE Wyoming	ZIP CODE 82007
SIGNATURE <i>Larry T. Perry L.S.</i>	DATE 16 June 2004	TELEPHONE 307 634 9360	

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. 807 East Allison Road			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

Flood plain was determined from "Allison Draw Master Drainage Plan" Nov. 1988 page 2-8, Table 2-4

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

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

637-4261

500 907

BUILDING PERMIT APPLICATION

City County

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

PLAN REVIEW NUMBER:				PERMIT & ZONING CERTIFICATE NUMBER: 03- 415					
RECEIVED BY <i>Jerry</i>	DATE 8/19/03	PLAN REVIEW <i>Materials Construction</i>	CHECK #	CASH	PERMIT	CHECK# 9/55	CASH		
VALUATION OF WORK \$3341.00 + 4659 + 8,000				INVESTIGATION FEE 3500 zoning cert.					
PLAN REVIEW FEE 16000 81 08				OTHER FEES					
PERMIT FEE 124 74				TOTAL FEES 240 82					
JOB ADDRESS 802 E Allison Rd.				TRACT SIZE 1/2 acre / Double Lot 18880					
SUBDIVISION Sun Ridge South			BLOCK NUMBER 1	LOT NUMBER 802 20x21					
OWNER Norman D. Mullikin		MAILING ADDRESS 802 E Allison Rd		ZIP CODE 82007	PHONE NUMBER 631-0349				
CONTRACTOR Carpenter's Rule		MAILING ADDRESS 3505 Chey St		ZIP CODE 82001	PHONE 221- 2577	LICENSE # 04-12674	CLASS A		
ARCHITECT/DESIGNER		MAILING ADDRESS		ZIP CODE	PHONE				
ENGINEER		MAILING ADDRESS							
USE OF BUILDING GARAGE				CHANGE OF USE FROM		TO			
Class of Work	New	Addition	Alteration	Remodl	Repair	Move	Installation	Remove	Demolish
DETAILED DESCRIPTION OF WORK CONSTRUCTING 3/4 sided garage ATTACHED TO W/END OF HOUSE									
Special Conditions	Temporary Power Pole	Additional Fee \$30.00	Jetted Hot Tub Tec.	Permit/Plan Review Conditions					
Vented Gas Log One	2	3	Other Which Level	See ZC 03-50600 Panel # 655					
Lawn Sprinklers Front	Back	Both	Backflow						
Type of Construction	Occupancy Group/Division		Number of Stories	Use Zone MR-2	Number of Dwelling Units				
Size of Building Sq. Ft. First Story 960	Second Story		Basement	Garage	Other				
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 Norman D. Mullikin			PLUMBING		LICENSE #				
CONTRACTOR Carpenter's Rule			CLASS		ELECTRICAL		LICENSE #		
OTHER			CLASS		MECHANICAL		LICENSE #		
FOR OFFICE USE ONLY									
Special Flood Hazard Area Approved By <i>cb</i>			Date	County Only Board of County Commissioners Approved By <i>cb</i>			Date 8-21-03		
Address Assigned By			Date	Plans Approved By			Date		
Development/Zoning Approved By <i>cb</i>			Date	Card Issued By <i>lined</i>			Date		
Fire Department Approved By			Date	Date Tap Fees Paid <i>6/25/03</i>			Date		
Approved For Issue By			Date	Date Permit Issued			Date		

PH-635-527

Do you need a Quick Start Foundation Permit? D-119A



631-0349
RECEIVED
AUG 19 2003
BUILDING DEPARTMENT
FILE COPY

