

RECEIVED

NATIONAL FLOOD INSURANCE PROGRAM

Expires December 31, 2005

FEB 6 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

MOROS INSTRUCTIONS

COSTA MESA

BUILDING OWNER'S NAME

City of Santa Clarita

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

22421 Market Street

CITY STATE ZIP CODE

Santa Clarita CA 91321

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

2831-011-904

BUILDING USE (e.g., Residential, Non-Residential, Addition, Accessory, etc. Use a Comments area, if necessary.)

Community Center

LATITUDE/LONGITUDE (OPTIONAL)

(##-##-## or #####)

HORIZONTAL DATUM: SOURCE: GPS (Type): USGS Quad Map Other NCS PTD

NAD 1927 NAD 1983

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME B3. STATE

City of Santa Clarita - 060729 Los Angeles CA

B4. MAP AND PANEL NUMBER	B5. SUFFIX	B6. FIRM INDEX DATE	B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)
060729 - 0460	C	9/29/1989	9/29/1989	A	1275.43

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): Los Angeles Floodway Map

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 (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 NAVD 88 Conversion/Comments lower elevation by 2.69 feet when using Newhall Datum

Elevation reference mark used: 1266.39 feet Does the elevation reference mark used appear on the FIRM? Yes No

a) Top of bottom floor (including basement or enclosure) x 1278.30 ft(m)

b) Top of next higher floor 1 story building N/A ft(m)

c) Bottom of lowest horizontal structural member (V zones only) N/A ft(m)

d) Attached garage (top of slab) None N/A ft(m)

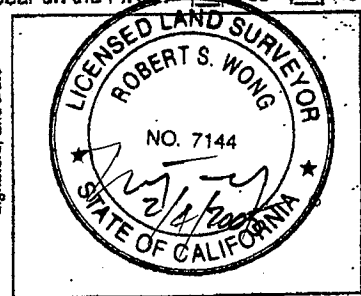
e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) x 1278.30 ft(m)

f) Lowest adjacent (finished) grade (LAG) x 1273.90 ft(m)

g) Highest adjacent (finished) grade (HAG) None N/A 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)



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 ROBERT S. WONG LICENSE NUMBER L 7144

TITLE PRESIDENT COMPANY NAME RAWA SURVEYING, INC.

ADDRESS 1784 ORIOLE DRIVE COSTA MESA CA CITY STATE ZIP CODE 92626

SIGNATURE [Signature] DATE 2/2/2005 TELEPHONE (714) 434-4930

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. 22421 Market Street	POLICY NUMBER
CITY Santa Clarita	STATE CA
ZIP CODE 91321	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (COMPLETED)

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

COMMENTS Machinery and/or equipment servicing: Domestic hot water boiler, HVAC and cooling equipment.

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. 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 of the building is ___ ft. (m) ___ in. (cm) above the highest adjacent grade. Complete items C3.h and C3.i only.
- 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 complete the 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 C, D, 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