ELEVATION CERTIFICATE OMB No. 1660-0008 U.S. DEPARTMENT OF HOMELAND SECURITY Expires February 28, 2009 Federal Emergency Management Agency National Flood Insurance Program Important: Read the instructions on pages 1-8. SECTION A - PROPERTY INFORMATION For Insurance Company Use: Building Owner's Name Policy Number PEST CONTROL Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number 26770 OAK ANE State A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TRACT NO 8575 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)

Non-Residential, Addition, Accessory, etc.)

Non-Residential, Addition, Accessory, etc.)

Non-Residential, Addition, Accessory, etc.)

Non-Residential, Non-Residential, Addition, Accessory, etc.) Horizontal Datum: NAD 1927 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 1 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) a) Square footage of attached garage sq ft 🔧 sq ft No. of permanent flood openings in the crawl space or b) No. of permanent flood openings in the attached garage enclosure(s) walls within 1.0 foot above adjacent grade walls within 1.0 foot above adjacent grade c) .Total net area of flood openings in A8.b Total net area of flood openings in A9.b SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION 62. County Name B1. NFIP Community Name & Community Number B3. State 060729 >auta ANGELES B4. Map/Panel Number B7. FIRM Panel B5, Suffix B6. FIRM Index , B9. Base Flood Elevation(s) (Zone B8, Flood Effective/Revised Date Date. Zone(s) AO, use base flood depth) 060 37 C08 40 20105 $\Delta \mathcal{O}$ B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. FIS Profile Community Determined Other (Describe) B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 **NAVD** 1988 Other (Describe) Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) 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, AF, 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. Vertical Datum Benchmark Utilized Conversion/Comments Check the measurement used. feet Top of bottom floor (including basement, crawl space, or enclosure floor) meters (Puerto Rico only) b) Top of the next higher floor feet meters (Puerto Rico only) Bottom of the lowest horizontal structural member (V Zones only) C)] feet meters (Puerto Rico only) d) Attached garage (top of slab) feet meters (Puerto Rico only) Lowest elevation of machinery or equipment servicing the building e) feet meters (Puerto Rico only) (Describe type of equipment in Comments) f) Lowest adjacent (finished) grade (LAG) feet meters (Puerto Rico only) Highest adjacent (finished) grade (HAG) g) 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. FRAM Certifier's Name Address State ZIP Code

Signaturé

Telephone

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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.					For Insurance Company Use:
Building Street Address (including A		o.) or P.O. Route and Box I	No.	1	Policy Number
City	ANE	State	7IP	Code	Company NAIC Number
SANTA CLAR	RITA C	Α.	925		Company in the Hamber
SECTIO	ON D - SURVEYOR, ENGIN	EÉR, OR ARCHITECT	CÉRTIFICAT	ЮИ (СОЙТ	INUED) ·
Copy both sides of this Elevation Ce	ertificate for (1) community offic	ial, (2) insurance agent/cor	npany, and (3) i	ouilding owne	r.
Comments					•
					c
				 	
Signature .		Date			Check here if attachments
SECTION E - BUILDING EL	EVATION INFORMATION	(SURVEY NOT REQUI	RED) FOR ZO	NE AO AN	D ZONE A (WITHOUT BFE)
					<u> </u>
For Zones AO and A (without BFE), and C. For Items, E4-E4, use natura	complete Items E1-E5. If the (all grade, if available. Check the	Certificate is intended to su a measurement used. In P	ipport a LOMA (uertò Rico only	or LOMR-F re	quest, complete Sections A, B,
E1. Provide elevation information :	for the following and check the	appropriate boxes to show	whether the ele	evation is abo	ve or below the highest adjacent
grade (HAG) and the lowest at a a) Top of bottom floor (includin	djacent grade (LAG),			_	
b) Top of bottom floor (including	ig basement, crawl space, or el ig basement, crawl space, or e	nclosure) is 4.4	feet me	eters 🗶 abo	ve or below the HAG. ve or below the LAG.
E2. For Building Diagrams 6-8 with	n permanent flood openings pro	ovided in Section A Items 8	and/or 9 (see p	age 8 of Inst	ructions), the next higher floor
(elevation C2.b in the diagram E3. Attached garage (top of slab) i		feet meters meters above or	helow the HAC	l-below the	HAG.
E4. Top of platform of machinery a	and/or equipment servicing the	building is 3.3	🔀 feet 🔲 me	ters 🙀 abo	ve or below the HAG.
E5. Zone AO only: If no flood depi	th number is available, is the to	p of the bottom floor elevat	ted in accordant	ce with the co	mmunity's floodplain management
ordinance? 🔼 Yes 🗌 No	Unknown. The local official	al must certify this informat	ion in Section G	i. ,	
SECTIO	N F - PROPERTY OWNER	(OR OWNER'S REPR	ESENTATIVE	CERTIFIC	ΔΥΙΟΝ
The property owner or owner's author					
or Zone AO must sign here. The sta	tements in Sections A, B, and I	E are correct to the best of	my knowledge.		isococa or community located by Ej
Property Owner's or Owner's Author	ized Representative's Name	BAKERSEI	ELA	/ A	ann al
Address		City	<u> </u>	State	ZIP Code
Signature	ku .	·. Data		1.32	23 - 9838
2005	20 ^m St.	3/20/09		Telephone	
Comments RESEARCHED	GS. SEE ATTAC	hed solls bo	1010FF RINGS #	GRANIE	AT TO BUILDING PER
determined ff	701550 5 10.14	0 2 2' AV		1 . 4	
77. 32. 34.00		IMUNITY INFORMATIC			Check here if attachments
The local official who is authorized by I	aw or ordinance to administer t	he community's floodplain	management of	rdinance can	complete Sections A. B. C. (or E)
and G of this Elevation Certificate. Co	mplete the applicable item(s) a	nd sign below. Check the i	measurement u	sed in Items (38. and G9.
G1. The information in Section C	was taken from other document y elevation information. (Indica	ntation that has been signe	d and sealed by	a licensed s	urveyor, engineer, or architect who
	ted Section E for a building loca				
	ems G4G9.) is provided for co				oddd Bi E) oi Zille AC.
G4. Permit Number	G5. Date Permit Issued	······			nce/Occupancy Issued
				o. compilar	
G7. This permit has been issued for:	New Construction] Substantial Improvement			
38. Elevation of as-built lowest floor (in		ng:	feet L	meters (PR)	Datum
G9. BFE or (in Zone AO) depth of flood	ling at the building site:		∐ feet ∐	meters (PR)	Datum
Local Official's Name	· · · · · · · · · · · · · · · · · · ·	Title			
Community Name		Telephone			
Signature	<u> </u>				
Signature		Date			
Comments		······································			
<u> </u>					Check here if attachments