U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATEImportant: Follow the instructions on pages 1–9.

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

SECTION A – PROPERTY INFORMATION					FOR INSUF	RANCE COMPANY USE	
A1. Building Owner's Name COPPER GATE APARTMENTS, LLC					Policy Num	ber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4750 AUBURN WAY NORTH, BUILDING C Company NAIC Number:						AIC Number:	
City AUBURN				State Washing	ton	ZIP Code 98002	
		nd Block Numbers, Ta BLA# BLA19-0008, K			•	,	
A4. Building Use (e.g., Residen	tial, Non-Residential,	Addition	, Accessory, e	etc.) RESIDEN	TIAL	
A5. Latitude/Longit	ude: Lat. <u>4</u>	7.35049	Long1	22.22422	Horizontal	Datum: NAD 1	927 🗵 NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	sed to obtain flood	d insurance.	
A7. Building Diagra	am Number	1B					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foot	age of crawl	space or enclosure(s)			N/A sq ft		
b) Number of p	permanent flo	ood openings in the cr	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade N/A
c) Total net are	ea of flood op	penings in A8.b		N/A sq in			
d) Engineered	flood openir	ıgs? ☐ Yes ⊠ N	lo				
A9. For a building w	vith an attach	ed garage:					
a) Square foot	age of attach	ed garage		N/A sq ft			
b) Number of p	permanent flo	ood openings in the at	tached g	arage within	1.0 foot above adja	acent grade N/A	
c) Total net are	ea of flood op	penings in A9.b		N/A sq	in		
d) Engineered	flood openin	gs? ☐ Yes ⊠ N	10				
	CTOTION D. EL COD INCUDANCE DATE MAD (EIDM) INFORMATION						
R1 NEID Commun	SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
	B1. NFIP Community Name & Community Number B2. County Name B3. State KING Washington						
B4. Map/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 Base Flood Depth)							
1251 G 09-29-1989 08-19-2020 X 51.07'							
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: [FIS Profile FIRM Community Determined Other/Source: Flo2D model by Atkins Global, 6-06-18 per T Perkins							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🗵 No							
Designation Date: CBRS DPA							

ELEVATION CERTIFICATE

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		•		
IMPORTANT: In these spaces, copy the corresponding information from Secti	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route 4750 AUBURN WAY NORTH, BUILDING C	Policy Number:			
City State ZIP C	Company NAIC Number			
AUBURN Washington 98002	²			
SECTION C – BUILDING ELEVATION INFORMATION	ON (SURVEY RE	EQUIRED)		
C1. Building elevations are based on: Construction Drawings* Buildi *A new Elevation Certificate will be required when construction of the building	ing Under Constru g is complete.	ction* X Finished Construction		
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE Complete Items C2.a–h below according to the building diagram specified in Benchmark Utilized: CITY OF AUBURN MON 209-002 Vertical Datum: N	Item A7. In Puerto			
Indicate elevation datum used for the elevations in items a) through h) below	·.			
☐ NGVD 1929 区 NAVD 1988 ☐ Other/Source:				
Datum used for building elevations must be the same as that used for the BF	E.	Check the measurement used.		
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)		53.0 \times feet \square meters		
, , ,		62.0 \times feet \square meters		
b) Top of the next higher floor		<u> </u>		
c) Bottom of the lowest horizontal structural member (V Zones only)		N/A feet meters		
d) Attached garage (top of slab)		N/A feet meters		
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)		52.9 X feet meters		
f) Lowest adjacent (finished) grade next to building (LAG)		52.0 × feet meters		
g) Highest adjacent (finished) grade next to building (HAG)		52.4 X feet meters		
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support		52.0 X feet meters		
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION				
This certification is to be signed and sealed by a land surveyor, engineer, or archill certify that the information on this Certificate represents my best efforts to interpestatement may be punishable by fine or imprisonment under 18 U.S. Code, Section	ret the data availa	law to certify elevation information. ble. I understand that any false		
Were latitude and longitude in Section A provided by a licensed land surveyor?	⊠Yes □ No	Check here if attachments.		
Certifier's Name License Number				
GLENN SPRAGUE, PLS 41299		N. R. SPA		
Title PRINCIPAL, SENIOR PROJECT SURVEYOR		STET OF WASHING		
Company Name CORE DESIGN INC.	_	Can to Corp		
Address 12100 NE 195TH PLACE, SUITE 300		Alexander Alexan		
	ZIP Code 98011	01/29/21		
	Telephone (425) 885-7877	Ext.		
Copy all pages of this Elevation Certificate and all attachments for (1) community office	cial, (2) insurance a	agent/company, and (3) building owner.		
Comments (including type of equipment and location, per C2(e), if applicable) HIGH VOLTAGE POWER BOX				

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corresponding information from Section A.					INSURANCE (COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4750 AUBURN WAY NORTH, BUILDING C					cy Number:		
City	/ BURN	State Washington	ZIP Code 98002	Com	npany NAIC Nur	nber	
	SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)						
con	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.	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,						
	crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is			meters meters	above or	below the HAG.	
E2.	For Building Diagrams 6–9 with permanent floothe next higher floor (elevation C2.b in the diagrams) of the building is	d openings provided	I in Section A Items 8	8 and/or 9 (se		Instructions),	
E3.	Attached garage (top of slab) is			meters	above or 🔲 l	below the HAG.	
E4.	Top of platform of machinery and/or equipment servicing the building is			meters	above or L	below the HAG.	
E5.	Zone AO only: If no flood depth number is avail floodplain management ordinance? Yes		e bottom floor elevat wn. The local officia				
	SECTION F - PROPERTY O	WNER (OR OWNE	R'S REPRESENTAT	ΓΙVE) CERTIF	CATION		
The	e property owner or owner's authorized represent nmunity-issued BFE) or Zone AO must sign here	ative who completes . The statements in	s Sections A, B, and Sections A, B, and E	E for Zone A are correct to	(without a FEM <i>i</i> the best of my	A-issued or knowledge.	
	perty Owner or Owner's Authorized Representati ENT PARRISH	ive's Name					
	dress		City	State		ZIP Code	
) W CATALDO AVE, STE 100		SPOKANE Date	Washing Telepho		99201	
		•	Suite	(509) 32			
Cor	mments						
					Check here	if attachments.	

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IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4750 AUBURN WAY NORTH, BUILDING C					ber:		
City AUBURN	ZIP Code n 98002		Company N	AIC Number			
AUBURN Washington 98002 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–G10. In Puerto Rico only, enter meters.							
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 or Zone AO.	on E for a building	located in Zone A (without	t a FEMA	N-issued or co	ommunity-issued BFE)		
G3. The following information (Items G4–	G10) is provided fo	or community floodplain ma	anageme	ent purposes			
G4. Permit Number	G5. Date Permit			Date Certificate of Compliance/Occupancy Issued			
BLD19-0077	12/20/2019	1	1	/21/2021			
G7. This permit has been issued for:] New Construction	n 🗌 Substantial Improver	ment				
G8. Elevation of as-built lowest floor (including of the building:	ı basement) -	53.00	X feet	meters	Datum NAVD 88		
G9. BFE or (in Zone AO) depth of flooding at t	he building site: _	51.07	X feet	meters	Datum NAVD 88		
G10. Community's design flood elevation:	-	52.07	X feet	meters	Datum NAVD 88		
Local Official's Name		Title					
Jason Krum		Building Official					
Community Name City of Auburn		Telephone (253) 804-5069					
Signature		Date					
Comments (including type of equipment and loc	ation, per C2(e), it	f applicable)					
				☐ Ch	eck here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Building Street Address (including A 4750 AUBURN WAY NORTH, BUIL	Policy Number:		
City AUBURN	State Washington	ZIP Code 98002	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption EAST SIDE

Clear Photo One



Photo Two

Photo Two Caption NORTH SIDE

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including 4750 AUBURN WAY NORTH, BUI	Policy Number:		
City	State	ZIP Code	Company NAIC Number
AUBURN	Washington	98002	

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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

Photo Three Caption SOUTH SIDE

Clear Photo Three



Photo Four

Photo Four Caption WEST SIDE

Clear Photo Four