ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

Conversion and this Flowetian Contificate and all attachments for	- 14					
Copy all pages of this Elevation Certificate and all attachments for) ([) community onicial	, (Z) insurance a	gent/company,	anu (s) building owner.

	SEC	TION A - PROPERTY	(INFOR	MATION		FOR INSUF	RANCE COMPANY USE	
A1. Building Owner's Name Policy Nur 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 J							AIC Number:	
CityStateZIP CodeAUBURNWashington98002								
		nd Block Numbers, Ta BLA# BLA19-0008, K						
A4. Building Use (e.g., Resider	ntial, Non-Residential,	Addition	, Accessory,	etc.) RESIDEN	TIAL		
A5. Latitude/Longi	tude: Lat. 4	7.35014	Long1	22.22246	Horizonta	Datum: 🗌 NAD 1	927 🗙 NAD 1983	
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being ι	ised to obtain flood	d insurance.		
A7. Building Diagra	am Number	1B						
A8. For a building	with a crawls	pace or enclosure(s):						
a) Square foo	tage 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 ar	ea of flood o	penings in A8.b		N/A sq ir	1			
d) Engineered	flood openir	ngs? 🗌 Yes 🗵 I	No					
A9. For a building v	vith an attach	ned garage:						
a) Square foot	age of attach	ned garage		N/A sq ft				
					1.0 foot above adi	acent grade N/A		
 b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u> c) Total net area of flood openings in A9.b N/A sq in 								
d) Engineered flood openings? Yes X No								
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Community Name & Community NumberB2. County NameB3. StateCITY OF AUBURN (530073)KINGWashington								
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	Effective/ Zone(s) (2			Base Flood Elevation(s) (Zone AO, use Base Flood Depth)	
1251	G 09-29-1989 Revised Date 08-19-2020 X 51.36'							
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:								
B11. Indicate elevation datum used for BFE in Item B9: 🗌 NGVD 1929 🗵 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 I	-		CBRS			,		

ELEVATION CERTIFICATE	OMB No. 1660-0008 Expiration Date: November 30, 2022		
IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St 4750 AUBURN WAY NORTH, BUILDING J	uite, and/or Bldg. No.) or P	.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
AUBURN	Washington	98002	
SECTION C – BUII	LDING ELEVATION INFO	ORMATION (SURVEY F	(EQUIRED)
C1. Building elevations are based on: C1. Building elevations are based on: C1. *A new Elevation Certificate will be require C2. Elevations – Zones A1–A30, AE, AH, A		0 1	
Complete Items C2.a–h below according Benchmark Utilized: <u>CITY OF AUBURN I</u>	to the building diagram spe		
Indicate elevation datum used for the elev	vations in items a) through	h) below.	
□ NGVD 1929 🔀 NAVD 1988			
Datum used for building elevations must l	be the same as that used for	or the BFE.	Check the measurement used.
a) Top of bottom floor (including baseme	ent, crawlspace, or enclosu	re floor)	52.8 🗙 feet 🗌 meters
b) Top of the next higher floor		-	61.8 X feet meters
c) Bottom of the lowest horizontal structu	ural member (V Zones only	/)	N/A feet meters
d) Attached garage (top of slab)	•	, 	N/A feet meters
e) Lowest elevation of machinery or equi (Describe type of equipment and local	ipment servicing the buildir tion in Comments)	ng	52.8 🗙 feet 🗌 meters
f) Lowest adjacent (finished) grade next	to building (LAG)		51.5 X feet meters
g) Highest adjacent (finished) grade nex	t to building (HAG)		51.8 X feet meters
 h) Lowest adjacent grade at lowest eleva structural support 	ation of deck or stairs, inclu	uding	52.0 🗙 feet 🗌 meters
SECTION D – SU	IRVEYOR, ENGINEER, C	OR ARCHITECT CERTI	FICATION
This certification is to be signed and sealed by I certify that the information on this Certificate statement may be punishable by fine or impris	represents my best efforts	s to interpret the data avai	by law to certify elevation information. Nable. I understand that any false
Were latitude and longitude in Section A provi			Check here if attachments.
Certifier's Name GLENN SPRAGUE, PLS	License Numb 41299	ber	P Cr.
Title PRINCIPAL, SENIOR PROJECT SURVEYOR	२		JUN OF WASHING
Company Name CORE DESIGN INC.		_	Cen Car
Address 12100 NE 195TH PLACE, SUITE 300			GISTERE
City BOTHELL	State Washington	ZIP Code 98011	01/29/21
Signature	Date January 29, 2021	Telephone (425) 885-7877	Ext.
Copy all pages of this Elevation Certificate and a		unity official, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and lo HIGH VOLTAGE POWER BOX	ocation, per C2(e), if applic	able)	

OMB No.	1660-0	0008		
Expiration	Date:	November	30,	2022

ELEVATION CERTIFICATE			Expiration Date	: November 30, 2022
IMPORTANT: In these spaces, copy the correspo	nding information	from Section A.	FOR INSURA	ICE COMPANY USE
Building Street Address (including Apt., Unit, Suite, a 4750 AUBURN WAY NORTH, BUILDING J	and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number	
City AUBURN	State Washington	ZIP Code 98002	Company NAI	C Number
SECTION E – BUILDING FOR ZC	ELEVATION INFO	RMATION (SURVEY NO E A (WITHOUT BFE)	T REQUIRED)	
For Zones AO and A (without BFE), complete Items complete Sections A, B,and C. For Items E1–E4, us enter meters.				
 E1. Provide elevation information for the following a the highest adjacent grade (HAG) and the lowe a) Top of bottom floor (including basement, 			ner the elevation is	above or below
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet 🗌 met	ers 🗌 above or	· ☐ below the HAG.
crawlspace, or enclosure) is		feet 🗌 met		below the LAG.
E2. For Building Diagrams 6–9 with permanent floo the next higher floor (elevation C2.b in	d openings provided	d in Section A Items 8 and/	or 9 (see pages 1-	-2 of Instructions),
the diagrams) of the building is		feet 🗌 met	ers 🗌 above or	below the HAG.
E3. Attached garage (top of slab) is		feet 🗌 met	ers 🗌 above or	below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is		feet 🗌 met	ers 🗌 above or	below the HAG.
E5. Zone AO only: If no flood depth number is avail floodplain management ordinance?		e bottom floor elevated in a own. The local official mus		
SECTION F – PROPERTY O	WNER (OR OWNE	R'S REPRESENTATIVE)	CERTIFICATION	
The property owner or owner's authorized represent community-issued BFE) or Zone AO must sign here	ative who completes . The statements in	s Sections A, B, and E for 2 Sections A, B, and E are c	Zone A (without a orrect to the best o	FEMA-issued or of my knowledge.
Property Owner or Owner's Authorized Representat BRENT PARRISH	ive's Name			
Address 120 W CATALDO AVE, STE 100		- ,	State Washington	ZIP Code 99201
Signature	I		Telephone (509) 321-3228	
Comments				
			Check	here if attachments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, St 4750 AUBURN WAY NORTH, BUILDING J	x No. Policy Number:					
City AUBURN	State Washingtor	ZIP Code 98002	Company NAIC Number			
	Ŭ					
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Compl	ete the applicable item(s)	and sign below. Check the measurement			
	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation					
G2. A community official completed Section or Zone AO.	on E for a building	located in Zone A (withou	t a FEMA-issued or community-issued BFE)			
G3. The following information (Items G4–	G10) is provided fo	or community floodplain m	anagement purposes.			
G4. Permit Number	G5. Date Permit	Issued	G6. Date Certificate of Compliance/Occupancy Issued			
BLD19-0083	12/20/2019		05/04/2021			
G7. This permit has been issued for:	New Construction	n 🗌 Substantial Improve	ment			
G8. Elevation of as-built lowest floor (including of the building:	g basement) -	52.80	X feet meters Datum NAVD 88			
G9. BFE or (in Zone AO) depth of flooding at	the building site: _	51.36	The feet meters Datum NAVD 88			
G10. Community's design flood elevation:	-	52.36	The 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				
		05/04/2021				
Comments (including type of equipment and loo	cation, per C2(e), if	applicable)				
			Check here if attachments.			

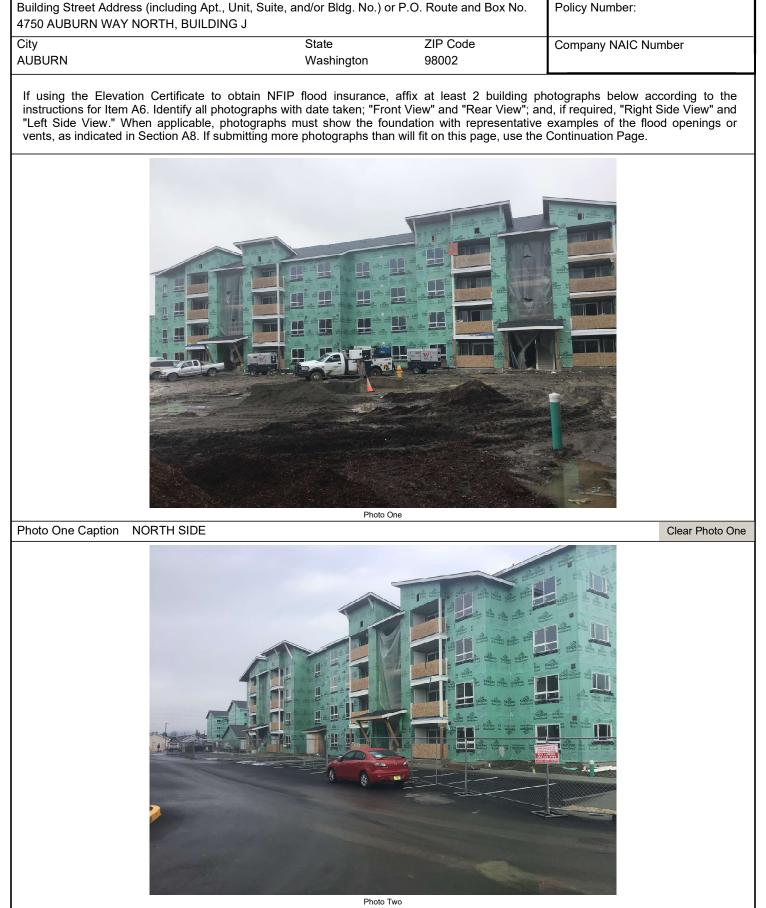


Photo Two Caption SOUTH SIDE

ELEVATION CERTIFICATE

Replaces all previous editions.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.

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

FOR INSURANCE COMPANY USE

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

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

ELEVATION CERTIFICATE Continuation		n Page	Expiration Date: November 30, 2022		
IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Su 4750 AUBURN WAY NORTH, BUILDING J	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 Caption WEST SIDE

Clear Photo Three



Photo Four Caption EAST SIDE

Photo Four

Clear Photo Four