

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

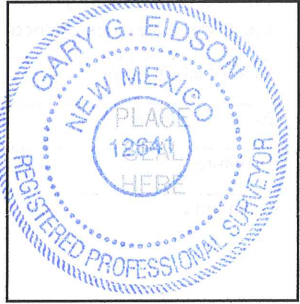
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>112 E. Llano Dr.</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 8, Block 17A, Seventh Unit, Broadmoor Addition, City of Hobbs, Lea County, New Mexico</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32.716694</b> Long. <b>103.134961</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) _____ sq ft		a) Square footage of attached garage <b>241</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>0</b>
c) Total net area of flood openings in A8.b _____ sq ft		c) Total net area of flood openings in A9.b <b>0</b> sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>
B4. Map/Panel Number <b>35025C1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP OZZY</b> Vertical Datum: <b>NAVD 1988</b> Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <b>3626 . 1</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) <b>3625 . 6</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <b>3626 . 1</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <b>3625 . 0</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <b>3625 . 5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary Eidson</i>		Date <b>04/21/2015</b>	ZIP Code <b>88240</b>
		Telephone <b>(575) 393-3117</b>	



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>112 E. Llano Dr.</b>			Policy Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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 **Lowest elevation of machinery or equipment servicing the building are the appliances inside the building.**

Signature *Ray E. Odom* Date **04/21/2015**

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 _____
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- 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>FOR INSURANCE COMPANY USE</b>		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 112 E. Llano Dr.	Policy Number:		
City Hobbs	State NM	ZIP Code 88240	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.

Front View (4/15/2015)

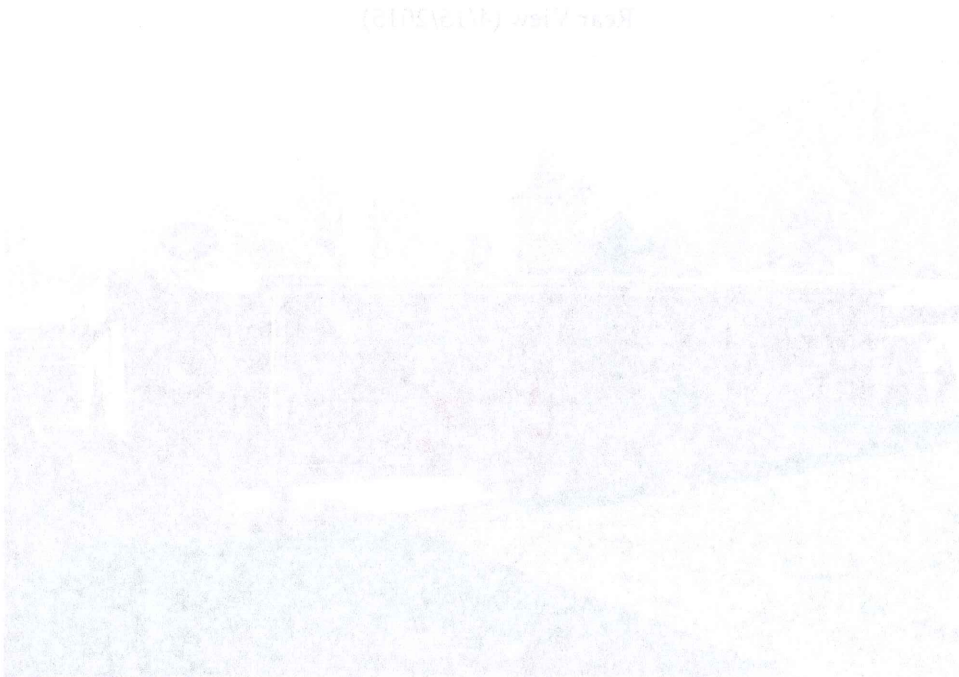
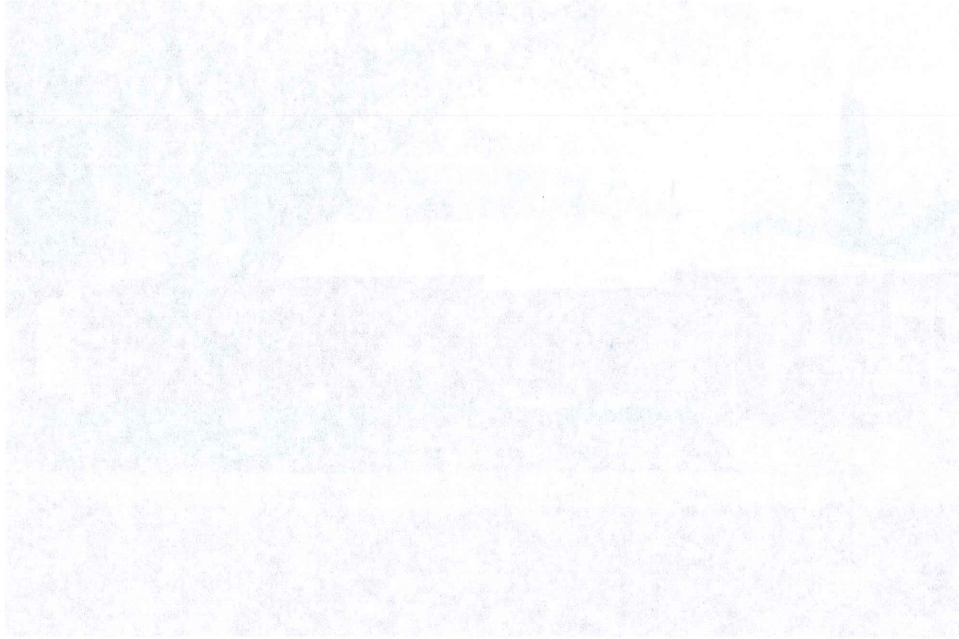


Rear View (4/15/2015)



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 112 E. Llano Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	Company NAIC Number:

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.



FILE: 73180280.14o OP1393542665255

NGS OPUS SOLUTION REPORT CP OZZY

All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: February 28, 2014  
RINEX FILE: 7318028p.14o TIME: 00:01:08 UTC

SOFTWARE: page5 1209.04 master51.pl 072313 START: 2014/01/28 15:10:00  
EPHEMERIS: igs17772.eph [precise] STOP: 2014/01/28 21:57:00  
NAV FILE: brdc0280.14n OBS USED: 17185 / 18450 : 93%  
ANT NAME: TRMR8\_GNSS3 NONE # FIXED AMB: 79 / 82 : 96%  
ARP HEIGHT: 1.135 OVERALL RMS: 0.014 (m)

REF FRAME: NAD\_83(2011) (EPOCH:2010.0000) IGS08 (EPOCH:2014.0761)

X: -1221618.563 (m) 0.006 (m) -1221619.349 (m) 0.006 (m)  
Y: -5231806.703 (m) 0.003 (m) -5231805.300 (m) 0.003 (m)  
Z: 3427995.556 (m) 0.009 (m) 3427995.398 (m) 0.009 (m)

LAT: 32 42 54.01581 0.007 (m) 32 42 54.03232 0.007 (m)  
E LON: 256 51 25.22884 0.006 (m) 256 51 25.18721 0.006 (m)  
W LON: 103 8 34.77116 0.006 (m) 103 8 34.81279 0.006 (m)  
EL HGT: 1086.316m 0.006 (m) 1085.231 (m) 0.006 (m)  
ORTHO HGT: 1107.925m 0.019 (m) [NAVD88 (Computed using GEOID12A)]

	UTM COORDINATES	STATE PLANE COORDINATES
	UTM (Zone 13)	SPC (3001 NM E)
Northing (Y) [meters]	3621217.684	190776.410m
Easting (X) [meters]	674042.287	276590.705m
Convergence [degrees]	1.00389221	0.64339915
Point Scale	0.99997352	1.00006259
Combined Factor	0.99980300	0.99989205

US NATIONAL GRID DESIGNATOR: 13SFS7404221217(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE (m)
DO9610	TXS3 SEMINOLE CORS ARP	N324242.408	W1023747.241	48124.0
DO8869	TXLA LAMESA CORS ARP	N324540.901	W1015638.170	112518.5
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	121696.0

NEAREST NGS PUBLISHED CONTROL POINT

CV0848	BROADMOOR	N324254.723	W1030821.080	356.8
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This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name <b>Alexander M. Ormsby</b>	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>218 W. Mesa Dr.</b>	Company NAIC Number:
City <b>Hobbs</b> State <b>NM</b> ZIP Code <b>88240</b>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 10, Block 21A, Ninth Unit, Broadmoor Addition, City of Hobbs, Lea County, New Mexico.</b>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>	
A5. Latitude/Longitude: Lat. <b>32.717160 N</b> Long. <b>103.137586 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>	
A8. For a building with a crawlspace or enclosure(s):	A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) _____ sq ft	a) Square footage of attached garage <b>N/A</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq ft	c) Total net area of flood openings in A9.b _____ sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C / 1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: **CP Burrito** Vertical Datum: **NAVD 1988**

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

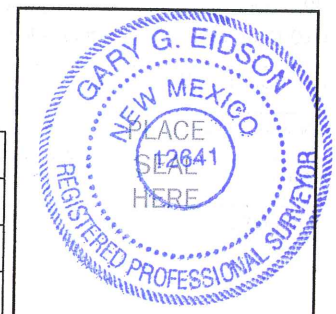
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>3627</u> . <u>4</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>3627</u> . <u>2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3626</u> . <u>9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>3626</u> . <u>9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  
 Check here if attachments.

Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>	Company Name <b>John West Surveying Company, Inc.</b>		
Address <b>412 N. Dal Paso</b>	City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
Signature <i>Gary G. Eidson</i>	Date <b>09/25/2014</b>	Telephone <b>(505) 318-1157</b>	



ELEVATION CERTIFICATE, page 2

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.
218 W. Mesa Dr.
City Hobbs State NM ZIP Code 88240
Policy Number:
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 Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the east side of the building.

Signature [Signature] Date 09/25/2014

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, crawlspace, or enclosure) is 0.5 feet [checked] above or [ ] below the HAG.
b) Top of bottom floor (including basement, crawlspace, or enclosure) is 0.5 feet [checked] above or [ ] below the LAG.
E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 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 0.3 feet [checked] 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 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. 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 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 Datum [ ]

G9. BFE or (in Zone AO) depth of flooding at the building site: [ ] feet [ ] meters Datum [ ]

G10. Community's design flood elevation: [ ] feet [ ] meters Datum [ ]

Local Official's Name Title

Community Name Telephone

Signature Date

Comments

[ ] Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 218 W. Mesa Dr.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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.

9/22/2014 Front View



9/22/2014 Rear View #1





<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 218 W. Mesa Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	Company NAIC Number:

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.

9/22/2014 Rear View #2



FILE: 03262980.08o 000034794

NGS OPUS SOLUTION REPORT CP BURRITO

All computed coordinate accuracies are listed as peak-to-peak values.
For additional information: http://www.ngs.noaa.gov/OPUS/about.html#accuracy

USER: gjeidson@cox.net DATE: December 18, 2009
RINEX FILE: 0326298t.08o TIME: 23:09:51 UTC

SOFTWARE: page5 0909.08 master40.pl 081023 START: 2008/10/24 19:39:00
EPHEMERIS: igs15025.eph [precise] STOP: 2008/10/24 23:29:00
NAV FILE: brdc2980.08n OBS USED: 7719 / 7898 : 98%
ANT NAME: TRM41249.00 NONE # FIXED AMB: 36 / 39 : 92%
ARP HEIGHT: 1.4088 OVERALL RMS: 0.017(m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2008.8139)

X: -1220289.835(m) 0.042(m) -1220290.540(m) 0.042(m)
Y: -5232780.653(m) 0.042(m) -5232779.258(m) 0.042(m)
Z: 3426980.388(m) 0.047(m) 3426980.231(m) 0.047(m)

LAT: 32 42 14.95292 0.031(m) 32 42 14.96964 0.031(m)
E LON: 256 52 23.40104 0.050(m) 256 52 23.36252 0.050(m)
W LON: 103 7 36.59896 0.050(m) 103 7 36.63748 0.050(m)
EL HGT: 1081.736m 0.052(m) 1080.643(m) 0.052(m)
ORTHO HGT: 1103.335m 0.059(m) [NAVD88 (Computed using GEOID03)]

UTM COORDINATES STATE PLANE COORDINATES
UTM (Zone 13) SPC (3001 NM E)
Northing (Y) [meters] 3620041.206 189590.189m
Easting (X) [meters] 675578.221 278119.342m
Convergence [degrees] 1.01233363 0.65194291
Point Scale 0.99998014 1.00006682
Combined Factor 0.99981033 0.99989700

US NATIONAL GRID DESIGNATOR: 13SFS7557820041(NAD 83)

BASE STATIONS USED

PID DESIGNATION LATITUDE LONGITUDE DISTANCE(m)
DG6517 NMRO ROSWELL CORS ARP N332341.834 W1043520.737 156617.7
DF5393 TXOD ODESSA RRP2 CORS ARP N315226.112 W1021854.556 119689.2
DF5391 TXLU LUBBOCK RRP2 CORS ARP N333207.490 W1015034.162 151210.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0845 HOBBS GENERAL TEL MICROWAVE N324212.827 W1030812.966 948.6

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.



# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

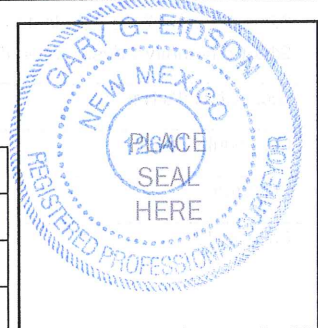
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Crystal Brusuelas</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or RO. Route and Box No. <b>222 W. Mesa Dr.</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 11, Block 21A, Ninth Unit, Broadmoor Addition, City of Hobbs, Lea County, New Mexico.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>32 717110 N</u> Long. <u>103.137793 W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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>1B</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft		a) Square footage of attached garage <u>N/A</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq ft		c) Total net area of flood openings in A9.b _____ sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>
B4. Map/Panel Number <b>35025C/1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/ Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <u>CP OZZY</u> Vertical Datum: <u>NAVD 1988</u> Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>3627 . 1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor <u>3627 . 5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <u>3627 . 5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <u>3626 . 9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <u>3626 . 9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
		ZIP Code <b>88240</b>	
Signature <i>Gary Eidson</i>		Date <b>06/02/2015</b>	Telephone <b>(575) 318-1157</b>



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>222 W. Mesa Dr.</b>			Policy Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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 **Lowest Elevation of machinery or equipment servicing the building are the appliances located on the main floor of the building (C2b).  
The garage has been enclosed establishing the top of bottom floor (C2a).**

Signature *Ray E. Larson* Date **06/02/2015**

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 222 W. Mesa Dr.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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.

06/01/2015 Front View



06/01/2015 Rear View



NGS OPUS SOLUTION REPORT CP OZZY

All computed coordinate accuracies are listed as peak-to-peak values.

For additional information: <http://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net)  
RINEX FILE: 7318028p.14o

DATE: February 28, 2014  
TIME: 00:01:08 UTC

SOFTWARE: page5 1209.04 master51.pl 072313      START: 2014/01/28 15:10:00  
EPHEMERIS: igs17772.eph [precise]              STOP: 2014/01/28 21:57:00  
NAV FILE: brdc0280.14n                          OBS USED: 17185 / 18450 : 93%  
ANT NAME: TRMR8\_GNSS3                          # FIXED AMB: 79 / 82 : 96%  
ARP HEIGHT: 1.135                              OVERALL RMS: 0.014 (m)

REF FRAME: NAD\_83(2011) (EPOCH:2010.0000)                          IGS08 (EPOCH:2014.0761)

X:        -1221618.563 (m)    0.006 (m)                          -1221619.349 (m)    0.006 (m)  
Y:        -5231806.703 (m)    0.003 (m)                          -5231805.300 (m)    0.003 (m)  
Z:        3427995.556 (m)    0.009 (m)                          3427995.398 (m)    0.009 (m)

LAT:      32 42 54.01581        0.007 (m)                          32 42 54.03232        0.007 (m)  
E LON:    256 51 25.22884        0.006 (m)                          256 51 25.18721        0.006 (m)  
W LON:    103 8 34.77116        0.006 (m)                          103 8 34.81279        0.006 (m)  
EL HGT:        1086.316m    0.006 (m)                          1085.231 (m)    0.006 (m)  
ORTHO HGT:    1107.925m    0.019 (m) [NAVD88 (Computed using GEOID12A)]

	UTM COORDINATES	STATE PLANE COORDINATES
	UTM (Zone 13)	SPC (3001 NM E)
Northing (Y) [meters]	3621217.684	190776.410m
Easting (X) [meters]	674042.287	276590.705m
Convergence [degrees]	1.00389221	0.64339915
Point Scale	0.99997352	1.00006259
Combined Factor	0.99980300	0.99989205

US NATIONAL GRID DESIGNATOR: 13SFS7404221217 (NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE (m)
DO9610	TXS3 SEMINOLE CORS ARP	N324242.408	W1023747.241	48124.0
DO8869	TXLA LAMESA CORS ARP	N324540.901	W1015638.170	112518.5
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	121696.0

NEAREST NGS PUBLISHED CONTROL POINT

CV0848        BROADMOOR                          N324254.723 W1030821.080        356.8

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

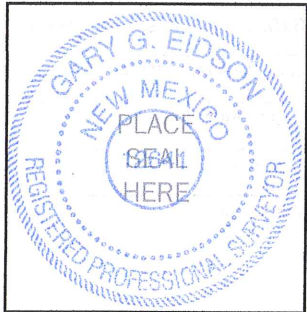
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Matthew S. Olenik</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>311 W. St. Anne Place</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 5, Block 1, First Unit, Replat of Norte Vista Addition, City of Hobbs, Lea County, New Mexico.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32 726832 N</b> Long. <b>103.139884 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>n/a</b> sq ft		a) Square footage of attached garage <b>432</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq ft		c) Total net area of flood openings in A9.b _____ sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>
B4. Map/Panel Number <b>35025C/1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP Coronado</b> Vertical Datum: <b>NAVD 1988</b>		
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.		
Check the measurement used.		
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>3632 . 7</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<b>3632 . 9</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<b>3632 . 4</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>3632 . 3</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>3632 . 1</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>3632 . 2</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 318-1157</b>
		Date <b>06/15/2015</b>	





**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 311 W. St. Anne Place			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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 **Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the west side of the building. Top of bottom floor (C2a) is the floor of the addition on the rear of the building. Top of next higher floor (C2b) is the main floor of the building.**

Signature Ray B. Edman Date 06/15/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____

Comments \_\_\_\_\_

Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 311 W. St. Anne Place			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

06/13/2015 Front View



06/13/2015 Rear View



FILE: 90251610.09o 000034755

NGS OPUS SOLUTION REPORT CP CORONADO

All computed coordinate accuracies are listed as peak-to-peak values. For additional information: <http://www.ngs.noaa.gov/OPUS/about.html#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: December 18, 2009  
RINEX FILE: 90251610.09o TIME: 21:51:18 UTC

SOFTWARE: page5 0909.08 master28.pl 081023 START: 2009/06/10 14:32:00  
EPHEMERIS: igsl5353.eph [precise] STOP: 2009/06/10 22:14:00  
NAV FILE: brdc1610.09n OBS USED: 18910 / 19931 : 95%  
ANT NAME: TRM41249.00 NONE # FIXED AMB: 97 / 113 : 86%  
ARP HEIGHT: 1.3873 OVERALL RMS: 0.021(m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2009.4405)

X: -1219212.613(m) 0.003(m) -1219213.326(m) 0.003(m)  
Y: -5231349.623(m) 0.014(m) -5231348.228(m) 0.014(m)  
Z: 3429538.942(m) 0.016(m) 3429538.781(m) 0.016(m)

LAT: 32 43 53.55805 0.021(m) 32 43 53.57466 0.021(m)  
E LON: 256 52 51.20523 0.006(m) 256 52 51.16641 0.006(m)  
W LON: 103 7 8.79477 0.006(m) 103 7 8.83359 0.006(m)  
EL HGT: 1086.325(m) 0.009(m) 1085.232(m) 0.009(m)  
ORTHO HGT: 1107.925(m) 0.030(m) [NAVD88 (Computed using GEOID03)]

UTM COORDINATES STATE PLANE COORDINATES

UTM (Zone 13) SPC (3001 NM E)  
Northing (Y) [meters] 3623091.068 192636.037  
Easting (X) [meters] 676248.362 278808.720  
Convergence [degrees] 1.01726634 0.65660558  
Point Scale 0.99998304 1.00006875  
Combined Factor 0.99981252 0.99989821

US NATIONAL GRID DESIGNATOR: 13SFS7624823091(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DG6517	NMRO ROSWELL CORS ARP	N332341.834	W1043520.737	155771.0
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	121689.5
DF5391	TXLU LUBBOCK RRP2 CORS ARP	N333207.490	W1015034.162	148785.6

NEAREST NGS PUBLISHED CONTROL POINT

CV0849 HOBBS N MUNICIPAL TANK N324319.019 W1030824.555 2241.6

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Stephen L. Sims</b>	Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>312 W. Mesa Dr.</b>	Company NAIC Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 15, Block 21A, Ninth Unit, Broadmoor Addition, City of Hobbs, Lea County, New Mexico.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>32.716834 N</u> Long. <u>103.138581 W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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>1B</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft	a) Square footage of attached garage <u>206</u> sq ft	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____	
c) Total net area of flood openings in A8.b _____ sq ft	c) Total net area of flood openings in A9.b _____ sq ft	
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C/1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: CP OZZY Vertical Datum: NAVD 1988

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

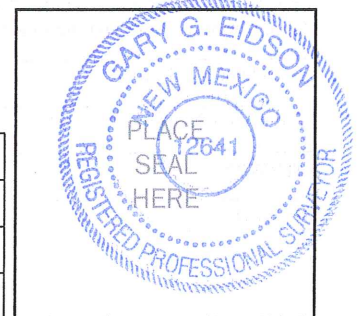
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>3628 . 5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>3628 . 2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>3628 . 4</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3628 . 0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>3628 . 2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  
 Check here if attachments.

Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
		ZIP Code <b>88240</b>	
Signature <i>Gary Eidson</i>		Date <b>03/09/2015</b>	Telephone <b>(575) 318-1157</b>



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 312 W. Mesa Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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: Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the east side of the building.

Signature: *Ray R. Edmon* Date: 03/09/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____

Comments \_\_\_\_\_

Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 312 W. Mesa Dr.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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.

3/07/15 Front View



3/7/15 Rear View



NGS OPUS SOLUTION REPORT CP OZZY

All computed coordinate accuracies are listed as peak-to-peak values.  
 For additional information: <http://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: February 28, 2014  
 RINEX FILE: 7318028p.14o TIME: 00:01:08 UTC

SOFTWARE: page5 1209.04 master51.pl 072313 START: 2014/01/28 15:10:00  
 EPHEMERIS: igs17772.eph [precise] STOP: 2014/01/28 21:57:00  
 NAV FILE: brdc0280.14n OBS USED: 17185 / 18450 : 93%  
 ANT NAME: TRMR8\_GNSS3 NONE # FIXED AMB: 79 / 82 : 96%  
 ARP HEIGHT: 1.135 OVERALL RMS: 0.014 (m)

REF FRAME: NAD\_83(2011) (EPOCH:2010.0000) IGS08 (EPOCH:2014.0761)

X:	-1221618.563 (m)	0.006 (m)	-1221619.349 (m)	0.006 (m)
Y:	-5231806.703 (m)	0.003 (m)	-5231805.300 (m)	0.003 (m)
Z:	3427995.556 (m)	0.009 (m)	3427995.398 (m)	0.009 (m)

LAT:	32 42 54.01581	0.007 (m)	32 42 54.03232	0.007 (m)
E LON:	256 51 25.22884	0.006 (m)	256 51 25.18721	0.006 (m)
W LON:	103 8 34.77116	0.006 (m)	103 8 34.81279	0.006 (m)
EL HGT:	1086.316m	0.006 (m)	1085.231 (m)	0.006 (m)
ORTHO HGT:	1107.925m	0.019 (m)	[NAVD88 (Computed using GEOID12A)]	

	UTM COORDINATES	STATE PLANE COORDINATES
	UTM (Zone 13)	SPC (3001 NM E)
Northing (Y) [meters]	3621217.684	190776.410m
Easting (X) [meters]	674042.287	276590.705m
Convergence [degrees]	1.00389221	0.64339915
Point Scale	0.99997352	1.00006259
Combined Factor	0.99980300	0.99989205

US NATIONAL GRID DESIGNATOR: 13SFS7404221217(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE (m)
DO9610	TXS3 SEMINOLE CORS ARP	N324242.408	W1023747.241	48124.0
DO8869	TXLA LAMESA CORS ARP	N324540.901	W1015638.170	112518.5
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	121696.0

NEAREST NGS PUBLISHED CONTROL POINT

CV0848	BROADMOOR	N324254.723	W1030821.080	356.8
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This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

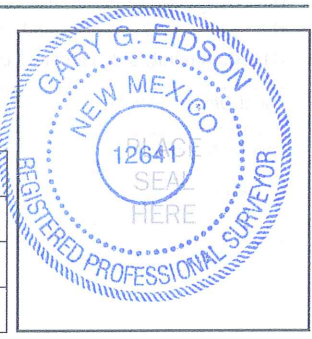
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Johnny Carter</b>	Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>501 E. Marland St.</b>	Company NAIC Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lots 7-12, Block 3, New Hobbs Addition to the City of Hobbs, Lea County, New Mexico</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Non-Residential</b>		
A5. Latitude/Longitude: Lat. <b>32.696173</b> Long. <b>103.130979</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) _____ sq ft	b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____	a) Square footage of attached garage _____ sq ft
c) Total net area of flood openings in A8.b _____ sq ft	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
		c) Total net area of flood openings in A9.b _____ sq ft
		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP BURRITO</b> Vertical Datum: <b>NAVD 1988</b>	
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <b>3607 . 7</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <b>3607 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <b>3606 . 5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <b>3606 . 6</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 393-3117</b>
		Date <b>12/02/2015</b>	





**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>501 E. Marland St.</b>			Policy Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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 **Lowest elevation of machinery or equipment servicing the building is the base of the A/C unit on the east side of the building.**

Signature *Bay S. E. O. M.* Date **12/02/2015**

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____

Comments \_\_\_\_\_

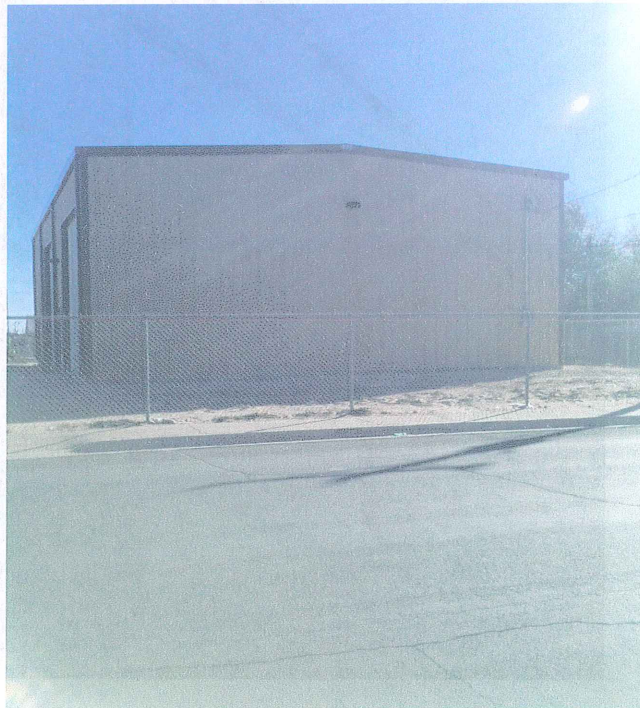
Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>501 E. Marland St.</b>			Policy Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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.

**Right Side View (11/18/2015)**



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. <b>501 E. Marland St.</b>			Policy Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	Company NAIC Number:

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.

Front View (11/18/2015)



FILE: 03262980.08o 000034794

NGS OPUS SOLUTION REPORT CP BURRITO

=====

All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.html#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: December 18, 2009  
RINEX FILE: 0326298t.08o TIME: 23:09:51 UTC

SOFTWARE: page5 0909.08 master40.pl 081023 START: 2008/10/24 19:39:00  
EPHEMERIS: igs15025.eph [precise] STOP: 2008/10/24 23:29:00  
NAV FILE: brdc2980.08n OBS USED: 7719 / 7898 : 98%  
ANT NAME: TRM41249.00 NONE # FIXED AMB: 36 / 39 : 92%  
ARP HEIGHT: 1.4088 OVERALL RMS: 0.017 (m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2008.8139)

X: -1220289.835 (m) 0.042 (m) -1220290.540 (m) 0.042 (m)  
Y: -5232780.653 (m) 0.042 (m) -5232779.258 (m) 0.042 (m)  
Z: 3426980.388 (m) 0.047 (m) 3426980.231 (m) 0.047 (m)

LAT: 32 42 14.95292 0.031 (m) 32 42 14.96964 0.031 (m)  
E LON: 256 52 23.40104 0.050 (m) 256 52 23.36252 0.050 (m)  
W LON: 103 7 36.59896 0.050 (m) 103 7 36.63748 0.050 (m)  
EL HGT: 1081.736m 0.052 (m) 1080.643 (m) 0.052 (m)  
ORTHO HGT: 1103.335m 0.059 (m) [NAVD88 (Computed using GEOID03)]

UTM COORDINATES STATE PLANE COORDINATES

UTM (Zone 13) SPC (3001 NM E)  
Northing (Y) [meters] 3620041.206 189590.189m  
Easting (X) [meters] 675578.221 278119.342m  
Convergence [degrees] 1.01233363 0.65194291  
Point Scale 0.99998014 1.00006682  
Combined Factor 0.99981033 0.99989700

US NATIONAL GRID DESIGNATOR: 13SFS7557820041(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE (m)
DG6517	NMRO ROSWELL CORS ARP	N332341.834	W1043520.737	156617.7
DF5393	TXOD ODESSA RRP2 CORS ARP	N315226.112	W1021854.556	119689.2
DF5391	TXLU LUBBOCK RRP2 CORS ARP	N333207.490	W1015034.162	151210.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0845 HOBBS GENERAL TEL MICROWAVE N324212.827 W1030812.966 948.6

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

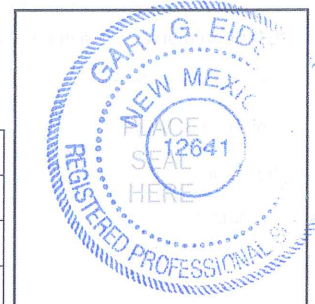
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Larry &amp; Teresa Carmichael</b>	Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>601 S. Dal Paso St.</b>	Company NAIC Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lots 9, 10, 11 &amp; 12, Block 28, New Hobbs Addition to the City of Hobbs, New Mexico</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32.695375</b> Long. <b>103.127910</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>5</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) _____ sq ft	a) Square footage of attached garage _____ sq ft	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____	
c) Total net area of flood openings in A8.b _____ sq ft	c) Total net area of flood openings in A9.b _____ sq ft	
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP BURRITO</b> Vertical Datum: <b>NAVD 1988</b> Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <b>3606 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <b>3605 . 7</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <b>3603 . 7</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <b>3604 . 1</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary A. Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 393-3117</b>
		Date <b>12/11/2015</b>	



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or R.O. Route and Box No. <b>601 S. Dal Paso St.</b>			Policy Number: _____
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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 **Lowest elevation of machinery or equipment servicing the building is the base of the A/C unit located on the east side of the building.**

Signature *Ray A. Edmon* Date **12/11/2015**

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____

Comments \_\_\_\_\_

Check here if attachments.

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>601 S. Dal Paso St.</b>			Policy Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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.

**Front View (12/08/2015)**



**East Side View (12/08/2015)**



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			Öäi İtí üi á†Ü COMPANY Uí Ü
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>712 T/ EbnQbt p Tu</b>			Policy Number:
City <b>I pcct</b>	State <b>ON</b>	ZIP Code <b>99351</b>	Company NAIC Number:

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.

Rear View (12/08/2015)



West Side View (12/08/2015)





FILE: 03262980.08o 000034794

NGS OPUS SOLUTION REPORT CP BURRITO

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All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.html#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: December 18, 2009  
RINEX FILE: 0326298t.08o TIME: 23:09:51 UTC

SOFTWARE: page5 0909.08 master40.pl 081023 START: 2008/10/24 19:39:00  
EPHEMERIS: igs15025.eph [precise] STOP: 2008/10/24 23:29:00  
NAV FILE: brdc2980.08n OBS USED: 7719 / 7898 : 98%  
ANT NAME: TRM41249.00 NONE # FIXED AMB: 36 / 39 : 92%  
ARP HEIGHT: 1.4088 OVERALL RMS: 0.017(m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2008.8139)

X: -1220289.835(m) 0.042(m) -1220290.540(m) 0.042(m)  
Y: -5232780.653(m) 0.042(m) -5232779.258(m) 0.042(m)  
Z: 3426980.388(m) 0.047(m) 3426980.231(m) 0.047(m)

LAT: 32 42 14.95292 0.031(m) 32 42 14.96964 0.031(m)  
E LON: 256 52 23.40104 0.050(m) 256 52 23.36252 0.050(m)  
W LON: 103 7 36.59896 0.050(m) 103 7 36.63748 0.050(m)  
EL HGT: 1081.736m 0.052(m) 1080.643(m) 0.052(m)  
ORTHO HGT: 1103.335m 0.059(m) [NAVD88 (Computed using GEOID03)]

	UTM COORDINATES	STATE PLANE COORDINATES
	UTM (Zone 13)	SPC (3001 NM E)
Northing (Y) [meters]	3620041.206	189590.189m
Easting (X) [meters]	675578.221	278119.342m
Convergence [degrees]	1.01233363	0.65194291
Point Scale	0.99998014	1.00006682
Combined Factor	0.99981033	0.99989700

US NATIONAL GRID DESIGNATOR: 13SFS7557820041(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE (m)
DG6517	NMRO ROSWELL CORS ARP	N332341.834	W1043520.737	156617.7
DF5393	TXOD ODESSA RRP2 CORS ARP	N315226.112	W1021854.556	119689.2
DF5391	TXLU LUBBOCK RRP2 CORS ARP	N333207.490	W1015034.162	151210.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0845 HOBBS GENERAL TEL MICROWAVE N324212.827 W1030812.966 948.6

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

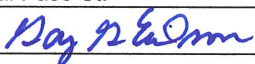
**IMPORTANT:** Follow the instructions on pages 1-9.

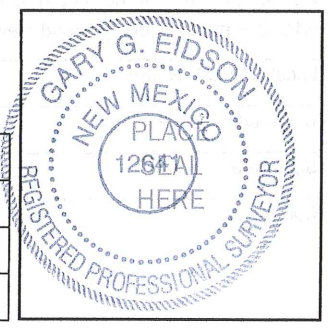
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Tommy F. Wallace Sr.</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or R.O. Route and Box No. <b>609 E. Palace Ave.</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 11, Block 3, Second Unit, Laughlin Addition, City of Hobbs, Lea County, NM</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32.684841 N</b> Long. <b>103.129446 W</b>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>9</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>624</b> sq ft		a) Square footage of attached garage <b>530</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>0</b>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>0</b>
c) Total net area of flood openings in A8.b <b>0</b> sq ft		c) Total net area of flood openings in A9.b <b>0</b> sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C/1345</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>	
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____						
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____						
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP Net Base</b> Vertical Datum: <b>NAVD 1988</b>			
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.			
			Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>3598 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters	
b) Top of the next higher floor	<b>3599 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters	
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters	
d) Attached garage (top of slab)	<b>3599 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>3600 . 6</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters	
f) Lowest adjacent (finished) grade next to building (LAG)	<b>3599 . 0</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters	
g) Highest adjacent (finished) grade next to building (HAG)	<b>3599 . 1</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters	
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters	

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature 		ZIP Code <b>88240</b>	Telephone <b>(575) 318-1157</b>
Date <b>10/12/2015</b>			



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>609 E. Palace Ave.</b>			Policy Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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 The top of the bottom floor (C2a) is the bottom of the crawl space. The top of the next higher floor (C2b) are additions on the south and east sides of the residence. The next highest floor elevation (3600.1') is an addition to the northwest side of the residence. The highest floor elevation (3600.6') is the original and main floor of the residence. The lowest elevation of machinery or equipment servicing the building are the appliances located on the main floor of the building.

Signature *Barry E. Quinn* Date 10/12/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments \_\_\_\_\_

Check here if attachments.

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 609 E. Palace Ave.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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.

Front View 10/08/2015



East Side View 10/08/2015



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 609 E. Palace Ave.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	Company NAIC Number:	

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.

Southeast View 10/08/2015



Southwest View 10/08/2015



FILE: nmhb165v.11o 000281873 CP NET BASE

1008 NOTE: Antenna offsets supplied by the user were zero.  
Coordinates returned will be for the antenna reference point (ARP).

NGS OPUS-RS SOLUTION REPORT

USER: tkaber@jwsc.biz DATE: July 06, 2011  
RINEX FILE: nmhb165v.11o TIME: 18:24:32 UTC

SOFTWARE: rsgps 1.35.1 RS50.prl 1.71 START: 2011/06/14 21:00:00  
EPHEMERIS: igs16402.eph [precise] STOP: 2011/06/14 21:59:59  
NAV FILE: brdc1650.11n OBS USED: 7524 / 7956 : 95%  
ANT NAME: LEIAS10 NONE QUALITY IND. 3.17/ 21.17  
ARP HEIGHT: 0.0 NORMALIZED RMS: 0.358

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2011.45177)

X: -1220289.374 (m) 0.007 (m) -1220290.111 (m) 0.007 (m)  
Y: -5232745.524 (m) 0.011 (m) -5232744.129 (m) 0.011 (m)  
Z: 3427046.482 (m) 0.009 (m) 3427046.311 (m) 0.009 (m)

LAT: 32 42 17.35978 0.005 (m) 32 42 17.37600 0.005 (m)  
E LON: 256 52 23.11201 0.007 (m) 256 52 23.07230 0.007 (m)  
W LON: 103 7 36.88799 0.007 (m) 103 7 36.92770 0.007 (m)  
EL HGT: 1088.571 (m) 0.014 (m) 1087.476 (m) 0.014 (m)  
ORTHO HGT: 1110.185 (m) 0.021 (m) [NAVD88 (Computed using GEOID09)]

	UTM COORDINATES	STATE PLANE COORDINATES
	UTM (Zone 13)	SPC (3001 NM E)
Northing (Y) [meters]	3620115.205	189664.248
Easting (X) [meters]	675569.385	278110.971
Convergence [degrees]	1.01230861	0.65191137
Point Scale	0.99998010	1.00006680
Combined Factor	0.99980922	0.99989591

US NATIONAL GRID DESIGNATOR: 13SFS7556920115(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE (m)
DM4149	TXAD ANDREWS CORS ARP	N321828.817	W1023236.945	70303.6
DM4161	TXKM KERMIT CORS ARP	N315033.357	W1030631.258	95642.7
DM4702	TXMH MONAHANS CORS ARP	N313327.822	W1025338.397	129101.8
DM4704	TXSO STANTON CORS ARP	N320828.201	W1014827.360	138960.4
DM4167	TXPC PECOS CORS ARP	N312503.150	W1033056.373	147406.7
DG6517	NMRO ROSWELL CORS ARP	N332341.834	W1043520.737	156574.5
DM4153	TXCE CRANE CORS ARP	N312522.071	W1022127.184	159666.3
DM4163	TXMC MCCAMEY CORS ARP	N310755.563	W1021356.782	193845.3
DM4155	TXFS FORT STOCKTON CORS ARP	N305338.047	W1025159.447	202332.0

NEAREST NGS PUBLISHED CONTROL POINT

CV0845 HOBBS GEN TEL MICROWAVE N324212.827 W1030812.966 949.2

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.



**ENGINEERING DEPARTMENT**

---

200 E. Broadway St.  
Hobbs, NM 88240

575-397-9232 bus  
575-397-9227 fax

October 12, 2015

To Whom It May Concern:

The house located at 609 E. Palace Ave. is located in a Special Flood Hazard Area (SFHA). The City of Hobbs has copies of the FEMA flood insurance rate maps (FIRMS) showing the location of the home in relation to the SFHA.

The City can provide additional information, free of charge, on how you can reduce the flood insurance premium for this structure.

The options are worth considering!

Spending a few hundred dollars to satisfy FEMA approved alternatives could save thousands of dollars on flood insurance premiums as well as providing safety benefits.

Please call 575-391-4113 or email [sbaker@hobbsnm.org](mailto:sbaker@hobbsnm.org).

Sincerely,  
**CITY OF HOBBS, NEW MEXICO**

*Shelia Baker*, Sr. Staff Engineer

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Catherine I. Wreyford</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or R.O. Route and Box No. <b>631 W. Silver</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 23, Block 1A, Second Unit, Norte Vista Addition, City of Hobbs, Lea County, New Mexico.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32 728435 N</b> Long. <b>103.143451 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1A</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft		a) Square footage of attached garage <b>408</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq ft		c) Total net area of flood openings in A9.b _____ sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>
B4. Map/Panel Number <b>35025C/1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: **CP Nippy** Vertical Datum: **NAVD 1988**

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

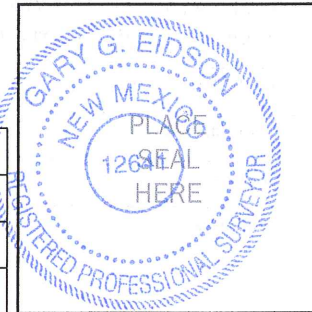
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>3634</u> . <u>7</u>	Check the measurement used. <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>3634</u> . <u>0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>3634</u> . <u>1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3633</u> . <u>8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>3634</u> . <u>0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  
 Check here if attachments.

Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
		ZIP Code <b>88240</b>	
Signature <i>Gary Eidson</i>		Date <b>03/31/2015</b>	Telephone <b>(575) 393-3117</b>





**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 631 W. Silver			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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 Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the west side of the building.

Signature *Ray E. Quinn* Date 03/31/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 _____
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- 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_  Check here if attachments.

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 631 W. Silver			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

03/27/2015 Front View



03/27/2015 Rear View



NGS OPUS SOLUTION REPORT CP NIPPY

=====

All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: May 23, 2013  
RINEX FILE: 7318099t.13o TIME: 19:57:00 UTC

SOFTWARE: page5 1209.04 master32.pl 082112 START: 2013/04/09 19:12:00  
EPHEMERIS: igs17352.eph [precise] STOP: 2013/04/09 22:11:00  
NAV FILE: brdc0990.13n OBS USED: 6992 / 7369 : 95%  
ANT NAME: TRMR8\_GNSS3 NONE # FIXED AMB: 45 / 50 : 90%  
ARP HEIGHT: 1.558 OVERALL RMS: 0.013(m)

REF FRAME: NAD\_83(2011)(EPOCH:2010.0000) IGS08 (EPOCH:2013.2709)

X: -1222821.726(m) 0.007(m) -1222822.502(m) 0.007(m)  
Y: -5229635.801(m) 0.011(m) -5229634.398(m) 0.011(m)  
Z: 3430869.862(m) 0.008(m) 3430869.708(m) 0.008(m)

LAT: 32 44 44.78584 0.001(m) 32 44 44.80252 0.001(m)  
E LON: 256 50 21.27312 0.006(m) 256 50 21.23183 0.006(m)  
W LON: 103 9 38.72688 0.006(m) 103 9 38.76817 0.006(m)  
EL HGT: 1092.393(m) 0.014(m) 1091.310(m) 0.014(m)  
ORTHO HGT: 1114.007(m) 0.028(m) [NAVD88 (Computed using GEOID12A)]

UTM COORDINATES STATE PLANE COORDINATES

UTM (Zone 13) SPC (3001 NM E)

Northing (Y) [meters] 3624600.336 194170.157  
Easting (X) [meters] 672317.796 274887.386  
Convergence [degrees] 0.99511442 0.63432441  
Point Scale 0.99996615 1.00005794  
Combined Factor 0.99979467 0.99988645

US NATIONAL GRID DESIGNATOR: 13SFS7231724600(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DM4704	TXSO STANTON CORS ARP	N320828.201	W1014827.359	143845.2
DM4161	TXKM KERMIT CORS ARP	N315033.357	W1030631.257	100289.4
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	125381.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0272 R 35 N324424. W1030939. 642.8

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-3.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name: Pablo Zamora

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
 720 South Dal Paso  
 City: Hobbs State: NM ZIP Code: 88240

Policy Number:

Company NAIC Number:

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
 Lot 14, 15 & 16, Block 21, Original New Hobbs Subdivision.

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. N32°41'39.0035" Long. W103°07'38.8229" Horizontal Datum:  NAD 1927  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 5

A8. For a building with a crawlspace or enclosure(s):  
 a) Square footage of crawlspace or enclosure(s) N/A sq ft  
 b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A  
 c) Total net area of flood openings in A8.b N/A sq in  
 d) Engineered flood openings?  Yes  No

A9. For a building with an attached garage:  
 a) Square footage of attached garage N/A sq ft  
 b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A  
 c) Total net area of flood openings in A9.b N/A sq in  
 d) Engineered flood openings?  Yes  No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
 City of Hobbs 350029

B2. County Name  
 Lea

B3. State  
 New Mexico

B4. Map/Panel Number 35025C1335	B5. Suffix D	B6. FIRM Index Date 12/16/2008	B7. FIRM Panel Effective/Revised Date 12/16/2008	B8. Flood Zone(s) AO	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 1' (3604.1)
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B10. Indicate the source of the Base Flood Elevation (BFE) data base or base flood depth entered in Item B9.

FIS Profile  FIRM  Community Determined  Other/Source: \_\_\_\_\_

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 Date: \_\_\_\_\_  CBRS  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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: City of Hobbs Base Station Vertical Datum: NAVD 88

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 3606.0  feet  meters

b) Top of the next higher floor N/A  feet  meters

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) 3606.1  feet  meters

f) Lowest adjacent (finished) grade next to building (LAG) 3603.1  feet  meters

g) Highest adjacent (finished) grade next to building (HAG) 3603.3  feet  meters

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 3603.2  feet  meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No

Check here if attachments.

Certifier's Name: William M. Hicks, III License Number: 12348

Title: Principal Surveyor Company Name: Pettigrew & Associates, P.A. Project No. 2014.1347

Address: 100 E. Navajo-Suite 100 City: Hobbs State: NM ZIP Code: 88240

Signature: [Signature] Date: 2-11-2015 Telephone: 575-393-9827



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 720 S. Dal Paso	Policy Number:
City: Hobbs State: NM ZIP Code: 88240	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 hazard characteristics indicate the lot is fully inundated by the flood hazard and flooding is not conveyed by the street. BFE for removal purposed should be determined as 1' above the lowest lot elevation. The lowest lot elevation prior to construction was 3603.1, therefore the BFE should be 3604.1'. The lowest machinery servicing the structure is an water heater inside the structure.

HAG and LAG are from pre construction.

Signature *W. Lewis Hicks* Date *2-11-2015*

**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, crawlspace, or enclosure) is 2.7  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is 2.9  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is NA  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is NA  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is 2.8  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: William M. Hicks, III

Address: 100 E. Navajo-Suite 100 City: Hobbs State: NM ZIP Code: 88240

Signature: *W. Thomas Hicks* Date: *2-11-2015* Telephone: 575-393-3827

Comments: See comments in Section "D".

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–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 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–G10) 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date
Comments	

Check here if attachments.

# Building Photographs

See Instructions for Item A6.

**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. Project No.  
720 S. Dal Paso Street Project 2014.1347

Policy Number:

City: Hobbs

State: NM ZIP Code: 88240

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.



South of lot - Looking north  
Picture taken 2/5/15

# Building Photographs

See Instructions for Item A6.

**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. Project No.  
720 S. Dal Paso Street Project 2014.1347

City: Hobbs

State: NM ZIP Code: 88240

FOR INSURANCE COMPANY USE

Policy Number:

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.



Back of lot- Looking west  
Picture taken 2/5/15

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

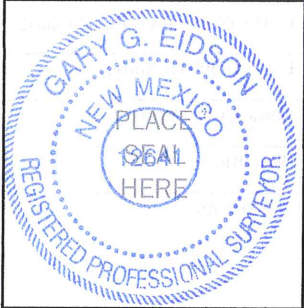
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <u>William Jennings Griffin</u>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>819 West Silver Dr.</u>		Company NAIC Number:
City <u>Hobbs</u>	State <u>NM</u>	ZIP Code <u>88240</u>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>Lot 11, Block 1, First Unit, North Acres Subdivision, City of Hobbs, Lea County, New Mexico.</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>32 728514 N</u> Long. <u>103.145701 W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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>1B</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft		a) Square footage of attached garage <u>N/A</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>
c) Total net area of flood openings in A8.b <u>0</u> sq ft		c) Total net area of flood openings in A9.b <u>0</u> sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <u>City of Hobbs 350029</u>			B2. County Name <u>Lea</u>		B3. State <u>NM</u>
B4. Map/Panel Number <u>35025C/1335</u>	B5. Suffix <u>D</u>	B6. FIRM Index Date <u>12/16/2008</u>	B7. FIRM Panel Effective/Revised Date <u>12/16/2008</u>	B8. Flood Zone(s) <u>AO</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>1'</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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <u>CP NIPPY</u> Vertical Datum: <u>NAVD 1988</u>		
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.		
		Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>3636 . 5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>3636 . 9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>3636 . 5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3636 . 2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>3636 . 4</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <u>Gary Eidson</u>		License Number <u>12641</u>	
Title <u>President</u>		Company Name <u>John West Surveying Company</u>	
Address <u>412 N. Dal Paso St.</u>		City <u>Hobbs</u>	State <u>NM</u>
Signature <u>Gary Eidson</u>		ZIP Code <u>88240</u>	Telephone <u>(575) 318-1157</u>





**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 819 West Silver Dr.	Policy Number:
City Hobbs	State NM
ZIP Code 88240	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 Lowest elevation of machinery or equipment servicing the building are the appliances located on the lowest floor of the building.

Signature *Ray E. Oron* Date 09/16/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 819 West Silver Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

Front View 09/15/2015



Rear View 09/15/2015



NGS OPUS SOLUTION REPORT CP NIPPY

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All computed coordinate accuracies are listed as peak-to-peak values.

For additional information: <http://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: May 23, 2013  
 RINEX FILE: 7318099t.13o TIME: 19:57:00 UTC

SOFTWARE: page5 1209.04 master32.pl 082112 START: 2013/04/09 19:12:00  
 EPHEMERIS: igs17352.eph [precise] STOP: 2013/04/09 22:11:00  
 NAV FILE: brdc0990.13n OBS USED: 6992 / 7369 : 95%  
 ANT NAME: TRMR8\_GNSS3 NONE # FIXED AMB: 45 / 50 : 90%  
 ARP HEIGHT: 1.558 OVERALL RMS: 0.013(m)

REF FRAME: NAD\_83(2011)(EPOCH:2010.0000) IGS08 (EPOCH:2013.2709)

X: -1222821.726(m) 0.007(m) -1222822.502(m) 0.007(m)  
 Y: -5229635.801(m) 0.011(m) -5229634.398(m) 0.011(m)  
 Z: 3430869.862(m) 0.008(m) 3430869.708(m) 0.008(m)

LAT: 32 44 44.78584 0.001(m) 32 44 44.80252 0.001(m)  
 E LON: 256 50 21.27312 0.006(m) 256 50 21.23183 0.006(m)  
 W LON: 103 9 38.72688 0.006(m) 103 9 38.76817 0.006(m)  
 EL HGT: 1092.393(m) 0.014(m) 1091.310(m) 0.014(m)  
 ORTHO HGT: 1114.007(m) 0.028(m) [NAVD88 (Computed using GEOID12A)]

UTM COORDINATES STATE PLANE COORDINATES

UTM (Zone 13) SPC (3001 NM E)

Northing (Y) [meters]	3624600.336	194170.157
Easting (X) [meters]	672317.796	274887.386
Convergence [degrees]	0.99511442	0.63432441
Point Scale	0.99996615	1.00005794
Combined Factor	0.99979467	0.99988645

US NATIONAL GRID DESIGNATOR: 13SFS7231724600(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DM4704	TXSO STANTON CORS ARP	N320828.201	W1014827.359	143845.2
DM4161	TXKM KERMIT CORS ARP	N315033.357	W1030631.257	100289.4
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	125381.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0272 R 35 N324424. W1030939. 642.8

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name <b>Daniel Kirkpatrick and Michelle Kirkpatrick</b>	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>900 W. Kiowa Ave.</b>	Company NAIC Number:
City <b>Hobbs</b> State <b>NM</b> ZIP Code <b>88240</b>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 1, Block 5, First Unit, Lincoln Park Subdivision, City of Hobbs, Lea County, New Mexico</b>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>	
A5. Latitude/Longitude: Lat. <b>32.736096 N</b> Long. <b>103.146417 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>	
A8. For a building with a crawlspace or enclosure(s):	A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft	a) Square footage of attached garage <b>480</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>N/A</b>	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>0</b>
c) Total net area of flood openings in A8.b <b>N/A</b> sq ft	c) Total net area of flood openings in A9.b <b>N/A</b> sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>
B4. Map/Panel Number <b>35025C/1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: **CP Nippy** Vertical Datum: **NAVD 1988**

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

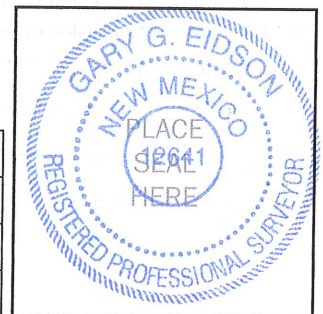
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>3638 . 2</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<b>3637 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>3637 . 7</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>3637 . 4</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>3637 . 6</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No
- Check here if attachments.

Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 318-1157</b>
Date <b>12/11/2015</b>			



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 900 W. Kiowa Ave.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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 Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the east side of the building.

Signature *Say B. Edmon* Date 12/11/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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
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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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community’s design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official’s Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments

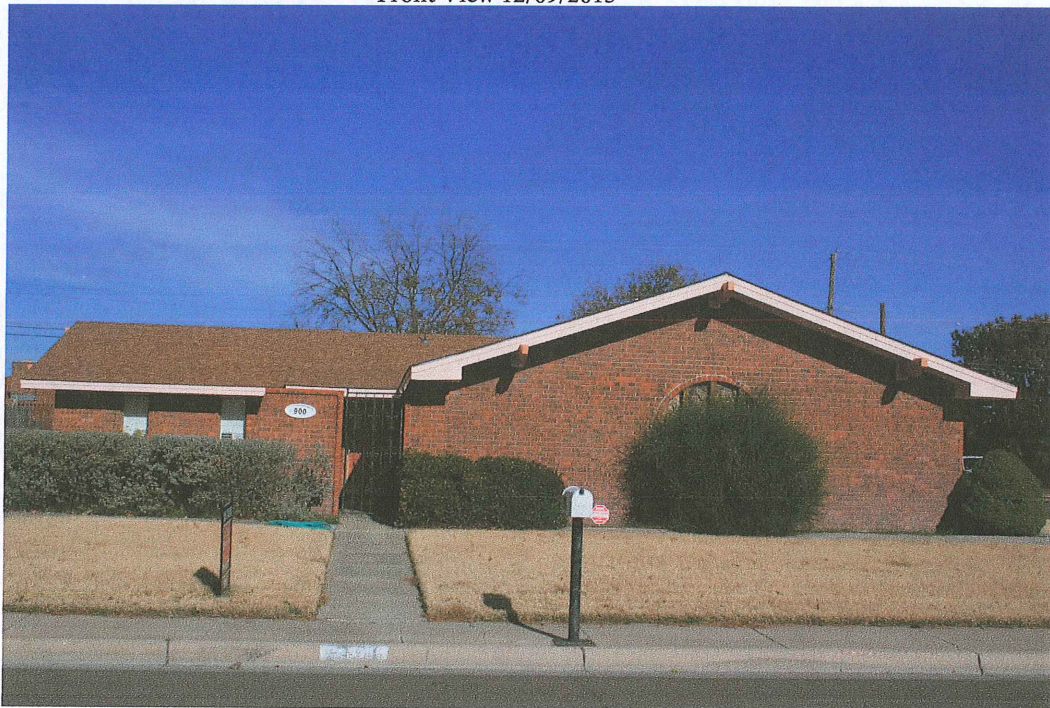
Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 900 W. Kiowa Ave.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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.

Front View 12/09/2015



East Side View 12/09/2015



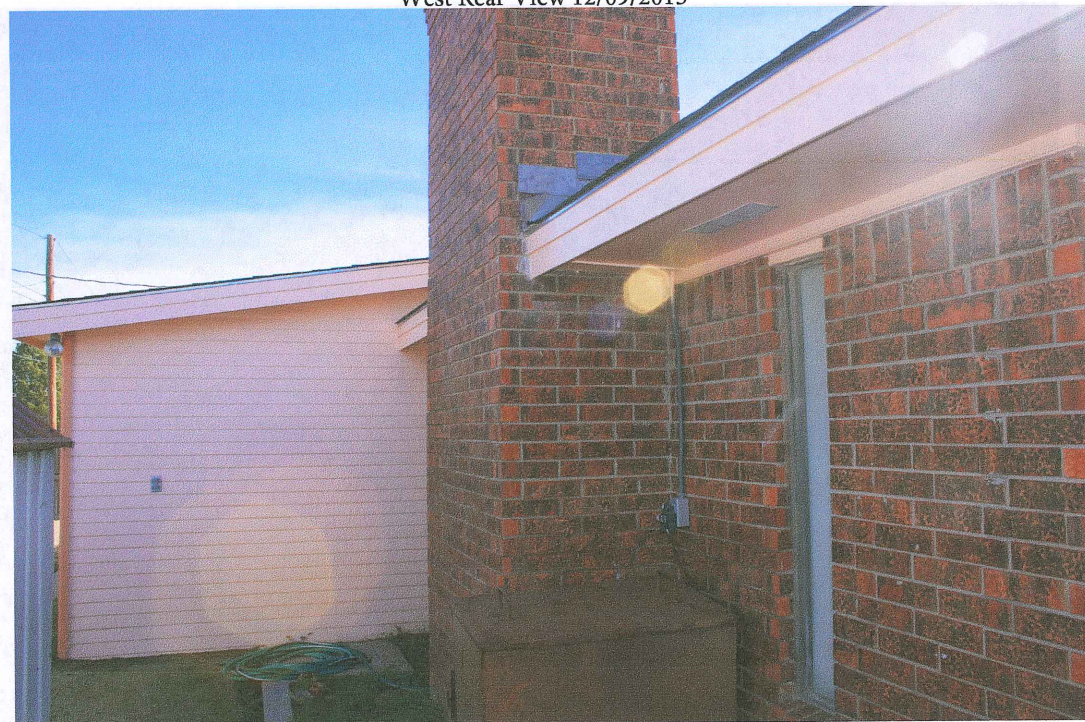
<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 900 W. Kiowa Ave.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	Company NAIC Number:	

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.

East Rear View 12/09/2015



West Rear View 12/09/2015



NGS OPUS SOLUTION REPORT CP NIPPY

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All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: May 23, 2013  
RINEX FILE: 7318099t.13o TIME: 19:57:00 UTC

SOFTWARE: page5 1209.04 master32.pl 082112 START: 2013/04/09 19:12:00  
EPHEMERIS: igs17352.eph [precise] STOP: 2013/04/09 22:11:00  
NAV FILE: brdc0990.13n OBS USED: 6992 / 7369 : 95%  
ANT NAME: TRMR8\_GNSS3 NONE # FIXED AMB: 45 / 50 : 90%  
ARP HEIGHT: 1.558 OVERALL RMS: 0.013(m)

REF FRAME: NAD\_83(2011)(EPOCH:2010.0000) IGS08 (EPOCH:2013.2709)

X: -1222821.726(m) 0.007(m) -1222822.502(m) 0.007(m)  
Y: -5229635.801(m) 0.011(m) -5229634.398(m) 0.011(m)  
Z: 3430869.862(m) 0.008(m) 3430869.708(m) 0.008(m)

LAT: 32 44 44.78584 0.001(m) 32 44 44.80252 0.001(m)  
E LON: 256 50 21.27312 0.006(m) 256 50 21.23183 0.006(m)  
W LON: 103 9 38.72688 0.006(m) 103 9 38.76817 0.006(m)  
EL HGT: 1092.393(m) 0.014(m) 1091.310(m) 0.014(m)  
ORTHO HGT: 1114.007(m) 0.028(m) [NAVD88 (Computed using GEOID12A)]

UTM COORDINATES STATE PLANE COORDINATES

UTM (Zone 13) SPC (3001 NM E)

Northing (Y) [meters] 3624600.336 194170.157  
Easting (X) [meters] 672317.796 274887.386  
Convergence [degrees] 0.99511442 0.63432441  
Point Scale 0.99996615 1.00005794  
Combined Factor 0.99979467 0.99988645

US NATIONAL GRID DESIGNATOR: 13SFS7231724600(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DM4704	TXSO STANTON CORS ARP	N320828.201	W1014827.359	143845.2
DM4161	TXKM KERMIT CORS ARP	N315033.357	W1030631.257	100289.4
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	125381.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0272 R 35 N324424. W1030939. 642.8

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.



# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE	
A1. Building Owner's Name <b>Saul Villarreal &amp; Maria Del Carmen Mediano</b>	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>901 W. Pueblo Ave.</b>	Company NAIC Number:
City <b>Hobbs</b> State <b>NM</b> ZIP Code <b>88240</b>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 1, Block 7, Second Unit, Lincoln Park Addition, City of Hobbs, Lea County, New Mexico.</b>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>	
A5. Latitude/Longitude: Lat. <b>32 736660 N</b> Long. <b>103.146311 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>	
A8. For a building with a crawlspace or enclosure(s):	A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft	a) Square footage of attached garage <b>420</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>N/A</b>	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>0</b>
c) Total net area of flood openings in A8.b <b>N/A</b> sq ft	c) Total net area of flood openings in A9.b <b>0</b> sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C/1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: **COH #119** Vertical Datum: **NAVD 1988**

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

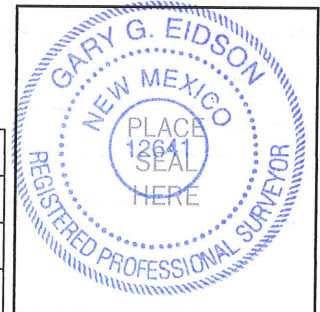
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>3638 . 9</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<b>3638 . 5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>3638 . 5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>3638 . 0</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>3638 . 2</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  
 Check here if attachments.

Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>	Company Name <b>John West Surveying Company</b>		
Address <b>412 N. Dal Paso St.</b>	City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
Signature <i>Gary G. Eidson</i>	Date <b>11/05/2015</b>	Telephone <b>(575) 318-1157</b>	



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 901 W. Pueblo Ave.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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 Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the west side of the building.

Signature *Ray G. Edman* Date 11/05/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____

Comments \_\_\_\_\_

Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 901 W. Pueblo Ave.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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.

Front View 11/04/2015



Garage Side View 11/04/2015



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 901 W. Pueblo Ave.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	Company NAIC Number:

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.

Rear View #1 11/04/2015



Rear View #2 11/04/2015



# ELEVATION CERTIFICATE

**Important: Read the instructions on pages 1-9.**

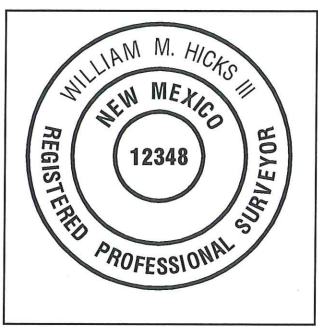
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A – PROPERTY INFORMATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name: <u>Trinidad Baca</u>	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>903 E. Roxana St.</u> City: <u>Hobbs</u> State: <u>NM</u> ZIP Code: <u>88240</u>	Company NAIC Number:
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>Lots 10, 11, and 12; Block 20; Original New Hobbs Addition</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>	
A5. Latitude/Longitude: Lat. <u>N32°41'39.43"</u> Long. <u>W103°07'33.84"</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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>5</u>	
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u> c) Total net area of flood openings in A8.b <u>N/A</u> sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	A9. For a building with an attached garage: a) Square footage of attached garage <u>N/A</u> sq ft 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 <u>N/A</u> sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <u>City of Hobbs 350029</u>		B2. County Name <u>Lea County</u>		B3. State <u>New Mexico</u>	
B4. Map/Panel Number <u>1335</u>	B5. Suffix <u>D</u>	B6. FIRM Index Date <u>December 16, 2008</u>	B7. FIRM Panel Effective/Revised Date <u>December 16, 2008</u>	B8. Flood Zone(s) AO	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>1'</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data base or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <u>City of Hobbs Reference Sta.</u> Vertical Datum: <u>NAVD 88</u> Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>3605.3</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>N/A</u> <input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u> <input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>N/A</u> <input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>3602.6</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3602.2</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>3602.3</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A</u> <input type="checkbox"/> feet <input type="checkbox"/> meters

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.	
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.	Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Check here if attachments.	
Certifier's Name: <u>William M. Hicks, III</u>	License Number: <u>12348</u>
Title: <u>Principal Surveyor</u>	Company Name: <u>Pettigrew &amp; Associates, P.A.</u> Project No. <u>2014.1279</u>
Address: <u>100 E. Navajo-Suite 100</u>	City: <u>Hobbs</u> State: <u>NM</u> ZIP Code: <u>88240</u>
Signature: <u>William M. Hicks</u>	Date: <u>1-29-2015</u> Telephone: <u>575-393-9827</u>



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 903 E. Roxana St.	Policy Number:
City: Hobbs State: NM ZIP Code: 88240	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.

The lowest machinery is an AC unit on the north side of the building.

Signature *William M. Hicks* Date 1-29-2015

**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, crawlspace, or enclosure) is 3.0  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is 3.1  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 0.3  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: William M. Hicks, III

Address: 100 E. Navajo-Suite 100 City: Hobbs State: NM ZIP Code: 88240

Signature: *William M. Hicks* Date: 1-29-2015 Telephone: 575-393-9827

Comments: See comments in Section "D".

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–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 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–G10) 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

# Building Photographs

See Instructions for Item A6.

**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. 903 E. Roxana St.		
City: Hobbs	State: NM	ZIP Code: 88240

FOR INSURANCE COMPANY USE
Policy Number:
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.



West of lot looking east  
Picture taken 1-21-15

# Building Photographs

See Instructions for Item A6.

**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. 903 E. Roxana St.	
City: Hobbs	State: NM    ZIP Code: 88240

FOR INSURANCE COMPANY USE
Policy Number:
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.



East of lot looking west  
Picture taken 1-21-15



# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

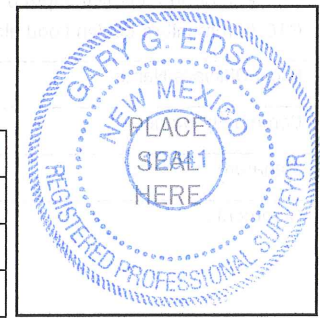
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Caleb R. Ragsdale</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or R.O. Route and Box No. <b>1003 E. Llano</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Tract 20, Mesa Verde Addition, City of Hobbs, Lea County, New Mexico.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32.714202 N</b> Long. <b>103.124335 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>9</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>1338</b> sq ft		a) Square footage of attached garage <b>231</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>9</b>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>0</b>
c) Total net area of flood openings in A8.b <b>9.36</b> sq ft		c) Total net area of flood openings in A9.b <b>0</b> sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>
B4. Map/Panel Number <b>35025C/1355</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP Burrito</b> Vertical Datum: <b>NAVD 1988</b>	
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <b>3613 . 7</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor <b>3615 . 4</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) <b>3614 . 3</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <b>3614 . 0</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <b>3613 . 5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <b>3613 . 7</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary Eidson</i>		Date <b>09/09/2015</b>	ZIP Code <b>88240</b>
		Telephone <b>(575) 318-1157</b>	



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1003 E. Llano</b>			Policy Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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 **Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the east side of the building.**

Signature *Ray B. Edson* Date **09/09/2015**

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____

Comments \_\_\_\_\_

Check here if attachments.

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1003 E. Llano			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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.

Front View 09/08/2015



Rear View 09/09/2015



FILE: 03262980.08o 000034794

NGS OPUS SOLUTION REPORT

CP BURRITO

All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.html#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net)  
RINEX FILE: 0326298t.08o

DATE: December 18, 2009  
TIME: 23:09:51 UTC

SOFTWARE: page5 0909.08 master40.pl 081023      START: 2008/10/24 19:39:00  
EPHEMERIS: igs15025.eph [precise]                  STOP: 2008/10/24 23:29:00  
NAV FILE: brdc2980.08n                              OBS USED: 7719 / 7898 : 98%  
ANT NAME: TRM41249.00                              # FIXED AMB: 36 / 39 : 92%  
ARP HEIGHT: 1.4088                                  OVERALL RMS: 0.017 (m)

REF FRAME: NAD\_83 (CORS96) (EPOCH:2002.0000)                  ITRF00 (EPOCH:2008.8139)

X:	-1220289.835 (m)	0.042 (m)	-1220290.540 (m)	0.042 (m)
Y:	-5232780.653 (m)	0.042 (m)	-5232779.258 (m)	0.042 (m)
Z:	3426980.388 (m)	0.047 (m)	3426980.231 (m)	0.047 (m)

LAT:	32 42 14.95292	0.031 (m)	32 42 14.96964	0.031 (m)
E LON:	256 52 23.40104	0.050 (m)	256 52 23.36252	0.050 (m)
W LON:	103 7 36.59896	0.050 (m)	103 7 36.63748	0.050 (m)
EL HGT:	1081.736m	0.052 (m)	1080.643 (m)	0.052 (m)
ORTHO HGT:	1103.335m	0.059 (m)	[NAVD88 (Computed using GEOID03)]	

	UTM COORDINATES	STATE PLANE COORDINATES
	UTM (Zone 13)	SPC (3001 NM E)
Northing (Y) [meters]	3620041.206	189590.189m
Easting (X) [meters]	675578.221	278119.342m
Convergence [degrees]	1.01233363	0.65194291
Point Scale	0.99998014	1.00006682
Combined Factor	0.99981033	0.99989700

US NATIONAL GRID DESIGNATOR: 13SFS7557820041 (NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE (m)
DG6517	NMRO ROSWELL CORS ARP	N32341.834	W1043520.737	156617.7
DF5393	TXOD ODESSA RRP2 CORS ARP	N315226.112	W1021854.556	119689.2
DF5391	TXLU LUBBOCK RRP2 CORS ARP	N333207.490	W1015034.162	151210.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0845	HOBBS GENERAL TEL MICROWAVE	N324212.827	W1030812.966	948.6
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This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

## Gary Eidson

---

**From:** Gary Eidson <gary@jwsc.biz>  
**Sent:** Wednesday, September 09, 2015 4:30 PM  
**To:** rlong1@farmersagent.com  
**Subject:** Updated Caleb ragsdale Elevation Cert.  
**Attachments:** Updated Caleb Ragsdale.pdf

Rebecca,

I have attached the updated elevation certificate.

The seller did three things that should help with premiums.

- 1) Added 5 new flood openings to the existing 4.
- 2) Added soil along the outside of the house and filed in flower beds so that the existing and new flood openings would be within 1' of ground. Originally only one of the flood openings was within 1'.
- 3) Added soil in the crawl space which changed the elevation of the bottom of the crawl space.

Please feel free to contact me if you have questions.

Gary



**ENGINEERING DEPARTMENT**

---

200 E. Broadway St.  
Hobbs, NM 88240

575-397-9232 bus  
575-397-9227 fax

August 18, 2015

To Whom It May Concern:

The house located at 1003 E. Llano is located in a Special Flood Hazard Area (SFHA). The City of Hobbs has copies of the FEMA flood insurance rate maps (FIRMS) showing the location of the home in relation to the SFHA.

The City can provide additional information, free of charge, on how you can reduce the flood insurance premium for this structure.

The options are worth considering!

Spending a few hundred dollars to satisfy FEMA approved alternatives could save thousands of dollars on flood insurance premiums as well as providing safety benefits.

Please call 575-391-4113 or email [sbaker@hobbsnm.org](mailto:sbaker@hobbsnm.org).

Sincerely,  
**CITY OF HOBBS, NEW MEXICO**

*Shelia Baker*, Sr. Staff Engineer

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

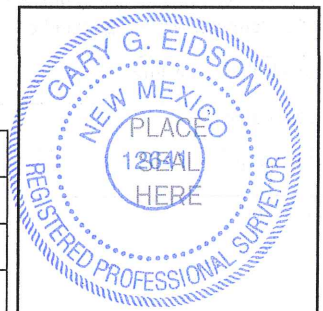
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION			FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Caleb R. Ragsdale</b>		Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1003 E. Llano</b>		Company NAIC Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Tract 20, Mesa Verde Addition, City of Hobbs, Lea County, New Mexico.</b>			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>			
A5. Latitude/Longitude: Lat. <b>32.714202 N</b> Long. <b>103.124335 W</b>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>9</b>			
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:	
a) Square footage of crawlspace or enclosure(s) <b>1338</b> sq ft		a) Square footage of attached garage <b>231</b> sq ft	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>1</b>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>0</b>	
c) Total net area of flood openings in A8.b <b>1.2</b> sq ft		c) Total net area of flood openings in A9.b <b>0</b> sq ft	
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>
B4. Map/Panel Number <b>35025C/1355</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP Burrito</b> Vertical Datum: <b>NAVD 1988</b>			
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.			
		Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>3612 . 6</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	<b>3615 . 4</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	<b>3614 . 3</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>3614 . 0</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>3613 . 5</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>3613 . 7</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 318-1157</b>
Date <b>08/19/2015</b>			



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1003 E. Llano</b>			Policy Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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 **Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the east side of the building.**

Signature *Ray D. Carlson* Date **08/19/2015**

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community’s design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official’s Name	Title
Community Name	Telephone
Signature	Date

Comments \_\_\_\_\_

Check here if attachments.



**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1003 E. Llano			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

Front View 08/17/2015



Rear View 08/17/2015



FILE: 03262980.08o 000034794

NGS OPUS SOLUTION REPORT CP BURRITO

All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.html#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: December 18, 2009  
RINEX FILE: 0326298t.08o TIME: 23:09:51 UTC

SOFTWARE: page5 0909.08 master40.pl 081023 START: 2008/10/24 19:39:00  
EPHEMERIS: igs15025.eph [precise] STOP: 2008/10/24 23:29:00  
NAV FILE: brdc2980.08n OBS USED: 7719 / 7898 : 98%  
ANT NAME: TRM41249.00 NONE # FIXED AMB: 36 / 39 : 92%  
ARP HEIGHT: 1.4088 OVERALL RMS: 0.017 (m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2008.8139)

X: -1220289.835 (m) 0.042 (m) -1220290.540 (m) 0.042 (m)  
Y: -5232780.653 (m) 0.042 (m) -5232779.258 (m) 0.042 (m)  
Z: 3426980.388 (m) 0.047 (m) 3426980.231 (m) 0.047 (m)

LAT: 32 42 14.95292 0.031 (m) 32 42 14.96964 0.031 (m)  
E LON: 256 52 23.40104 0.050 (m) 256 52 23.36252 0.050 (m)  
W LON: 103 7 36.59896 0.050 (m) 103 7 36.63748 0.050 (m)  
EL HGT: 1081.736m 0.052 (m) 1080.643 (m) 0.052 (m)  
ORTHO HGT: 1103.335m 0.059 (m) [NAVD88 (Computed using GEOID03)]

	UTM COORDINATES	STATE PLANE COORDINATES
	UTM (Zone 13)	SPC (3001 NM E)
Northing (Y) [meters]	3620041.206	189590.189m
Easting (X) [meters]	675578.221	278119.342m
Convergence [degrees]	1.01233363	0.65194291
Point Scale	0.99998014	1.00006682
Combined Factor	0.99981033	0.99989700

US NATIONAL GRID DESIGNATOR: 13SFS7557820041(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE (m)
DG6517	NMRO ROSWELL CORS ARP	N332341.834	W1043520.737	156617.7
DF5393	TXOD ODESSA RRP2 CORS ARP	N315226.112	W1021854.556	119689.2
DF5391	TXLU LUBBOCK RRP2 CORS ARP	N333207.490	W1015034.162	151210.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0845 HOBBS GENERAL TEL MICROWAVE N324212.827 W1030812.966 948.6

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name <b>Oscar Maciel</b>	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1012 Green Acres</b>	Company NAIC Number:
City <b>Hobbs</b> State <b>NM</b> ZIP Code <b>88240</b>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Tract in the SW/4 SW/4 Section 26, T18S, R38E, NMPM, City of Hobbs, Lea County, NM.</b>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>	
A5. Latitude/Longitude: Lat. <b>32 713131 N</b> Long. <b>103.123891 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>4</b>	
A8. For a building with a crawlspace or enclosure(s):	A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) _____ sq ft	a) Square footage of attached garage <b>643</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq ft	c) Total net area of flood openings in A9.b _____ sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>			B3. State <b>NM</b>		
B4. Map/Panel Number <b>35025C/1355</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>			
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____								
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____								
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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: **CP Burrito** Vertical Datum: **NAVD 1988**

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

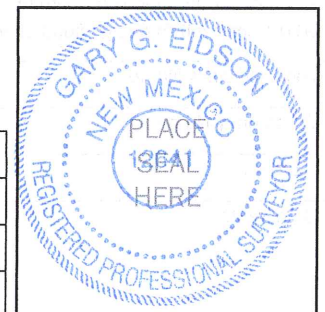
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>3606 . 9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>3614 . 7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>3614 . 7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>3606 . 9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3614 . 5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>3614 . 7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  
 Check here if attachments.

Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary G. Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 318-1157</b>
Date <b>05/19/2015</b>			



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1012 Green Acres</b>			Policy Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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 This building has three floor levels. The finish floor elevation of the main floor of the building is 3615.7. Lowest Elevation of machinery or equipment servicing the building are the appliances located in the basement.

Signature *Dayton* Date **05/19/2015**

**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, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community’s design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official’s Name	Title
Community Name	Telephone
Signature	Date

Comments \_\_\_\_\_

Check here if attachments.

See Instructions for Item A6.

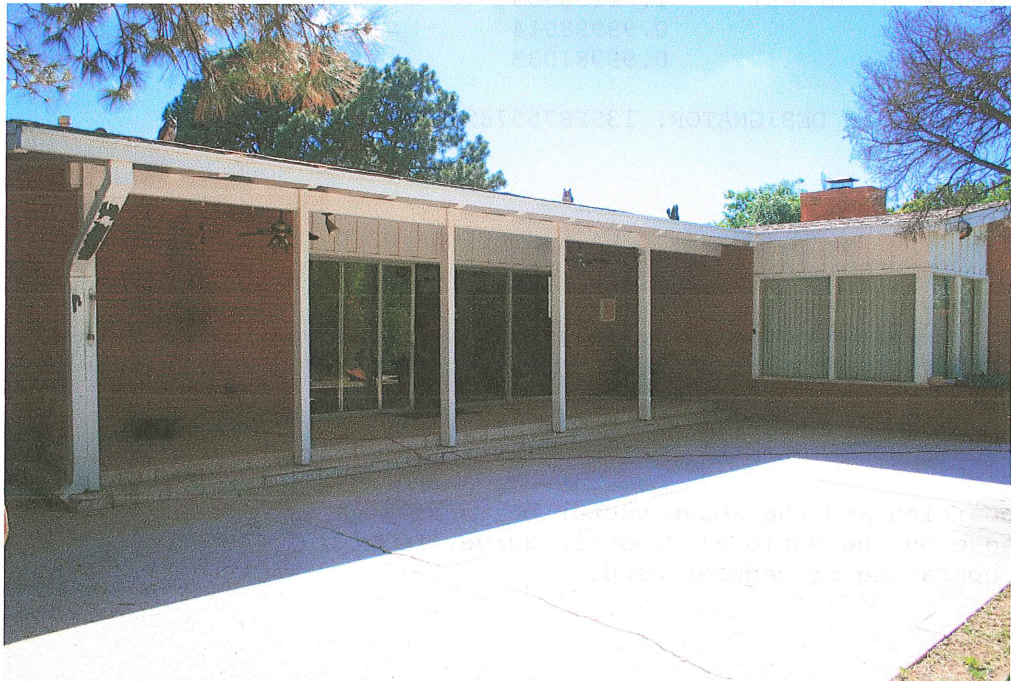
<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1012 Green Acres</b>			Policy Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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.

05/13/2015 Front View



05/15/2015 South Rear View



FILE: 03262980.08o 000034794

NGS OPUS SOLUTION REPORT CP BURRITO

All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.html#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: December 18, 2009  
RINEX FILE: 0326298t.08o TIME: 23:09:51 UTC

SOFTWARE: page5 0909.08 master40.pl 081023 START: 2008/10/24 19:39:00  
EPHEMERIS: igs15025.eph [precise] STOP: 2008/10/24 23:29:00  
NAV FILE: brdc2980.08n OBS USED: 7719 / 7898 : 98%  
ANT NAME: TRM41249.00 NONE # FIXED AMB: 36 / 39 : 92%  
ARP HEIGHT: 1.4088 OVERALL RMS: 0.017(m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2008.8139)

X:	-1220289.835(m)	0.042(m)	-1220290.540(m)	0.042(m)
Y:	-5232780.653(m)	0.042(m)	-5232779.258(m)	0.042(m)
Z:	3426980.388(m)	0.047(m)	3426980.231(m)	0.047(m)

LAT:	32 42 14.95292	0.031(m)	32 42 14.96964	0.031(m)
E LON:	256 52 23.40104	0.050(m)	256 52 23.36252	0.050(m)
W LON:	103 7 36.59896	0.050(m)	103 7 36.63748	0.050(m)
EL HGT:	1081.736m	0.052(m)	1080.643(m)	0.052(m)
ORTHO HGT:	1103.335m	0.059(m)	[NAVD88 (Computed using GEOID03)]	

	UTM COORDINATES	STATE PLANE COORDINATES
	UTM (Zone 13)	SPC (3001 NM E)
Northing (Y) [meters]	3620041.206	189590.189m
Easting (X) [meters]	675578.221	278119.342m
Convergence [degrees]	1.01233363	0.65194291
Point Scale	0.99998014	1.00006682
Combined Factor	0.99981033	0.99989700

US NATIONAL GRID DESIGNATOR: 13SFS7557820041(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DG6517	NMRO ROSWELL CORS ARP	N332341.834	W1043520.737	156617.7
DF5393	TXOD ODESSA RRP2 CORS ARP	N315226.112	W1021854.556	119689.2
DF5391	TXLU LUBBOCK RRP2 CORS ARP	N333207.490	W1015034.162	151210.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0845	HOBBS GENERAL TEL MICROWAVE	N324212.827	W1030812.966	948.6
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This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE


**IMPORTANT:** Follow the instructions on pages 1-9.

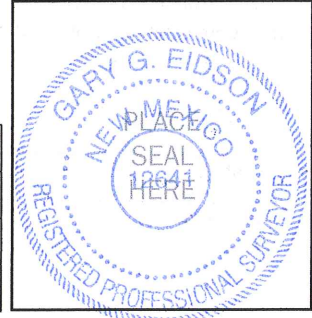
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Mikal Fonseca</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1118 E. Yucca Dr.</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 10, Block 3, First Unit, Bel Aire Addition, City of Hobbs, Lea County, New Mexico.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32 712633 N</b> Long. <b>103.122403 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>8</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>1000</b> sq ft		a) Square footage of attached garage <b>N/A</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>7</b>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b <b>12.7</b> sq ft		c) Total net area of flood openings in A9.b _____ sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>
B4. Map/Panel Number <b>35025C/1355</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP BURRITO</b> Vertical Datum: <b>NAVD 1988</b>	
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <b>3612 . 5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor <b>3614 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <b>3614 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <b>3612 . 5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <b>3613 . 2</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
		ZIP Code <b>88240</b>	
Signature 		Date <b>03/25/2015</b>	Telephone <b>(575) 318-1157</b>



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1118 E. Yucca Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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 Top of bottom floor elevation (C2a.) is the bottom of the crawl space. Lowest elevation of machinery or equipment servicing the building are the appliances located on the main floor (C2b.) of the building.  
Total net area of flood openings (A8c) is 1828.8 sq in.

Signature Ray G. Gomez Date 03/25/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____

Comments \_\_\_\_\_  Check here if attachments.



**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1118 E. Yucca Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

03/16/2015 Front View



03/16/2015 Rear View



FILE: 03262980.08o 000034794

NGS OPUS SOLUTION REPORT CP BURRITO

All computed coordinate accuracies are listed as peak-to-peak values.
For additional information: http://www.ngs.noaa.gov/OPUS/about.html#accuracy

USER: gjeidson@cox.net DATE: December 18, 2009
RINEX FILE: 0326298t.08o TIME: 23:09:51 UTC

SOFTWARE: page5 0909.08 master40.pl 081023 START: 2008/10/24 19:39:00
EPHEMERIS: igs15025.eph [precise] STOP: 2008/10/24 23:29:00
NAV FILE: brdc2980.08n OBS USED: 7719 / 7898 : 98%
ANT NAME: TRM41249.00 NONE # FIXED AMB: 36 / 39 : 92%
ARP HEIGHT: 1.4088 OVERALL RMS: 0.017(m)

REF FRAME: NAD\_83(CORS96)(EPOCH:2002.0000) ITRF00(EPOCH:2008.8139)

X: -1220289.835(m) 0.042(m) -1220290.540(m) 0.042(m)
Y: -5232780.653(m) 0.042(m) -5232779.258(m) 0.042(m)
Z: 3426980.388(m) 0.047(m) 3426980.231(m) 0.047(m)

LAT: 32 42 14.95292 0.031(m) 32 42 14.96964 0.031(m)
E LON: 256 52 23.40104 0.050(m) 256 52 23.36252 0.050(m)
W LON: 103 7 36.59896 0.050(m) 103 7 36.63748 0.050(m)
EL HGT: 1081.736m 0.052(m) 1080.643(m) 0.052(m)
ORTHO HGT: 1103.335m 0.059(m) [NAVD88 (Computed using GEOID03)]

UTM COORDINATES STATE PLANE COORDINATES
UTM (Zone 13) SPC (3001 NM E)
Northing (Y) [meters] 3620041.206 189590.189m
Easting (X) [meters] 675578.221 278119.342m
Convergence [degrees] 1.01233363 0.65194291
Point Scale 0.99998014 1.00006682
Combined Factor 0.99981033 0.99989700

US NATIONAL GRID DESIGNATOR: 13SFS7557820041(NAD 83)

BASE STATIONS USED

PID DESIGNATION LATITUDE LONGITUDE DISTANCE(m)
DG6517 NMRO ROSWELL CORS ARP N332341.834 W1043520.737 156617.7
DF5393 TXOD ODESSA RRP2 CORS ARP N315226.112 W1021854.556 119689.2
DF5391 TXLU LUBBOCK RRP2 CORS ARP N333207.490 W1015034.162 151210.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0845 HOBBS GENERAL TEL MICROWAVE N324212.827 W1030812.966 948.6

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

<b>FOR INSURANCE COMPANY USE</b>	
A1. Building Owner's Name <b>David Robson</b>	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1118 N. Llano Dr.</b>	Company NAIC Number:
City <b>Hobbs</b> State <b>NM</b> ZIP Code <b>88240</b>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 17, Block 18, Unit 1, Taylor Ranch Addition, City of Hobbs, Lea County, New Mexico.</b>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>	
A5. Latitude/Longitude: Lat. <b>32.711882 N</b> Long. <b>103.117306 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>	
A8. For a building with a crawlspace or enclosure(s):	A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft	a) Square footage of attached garage <b>209</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>0</b>
c) Total net area of flood openings in A8.b _____ sq ft	c) Total net area of flood openings in A9.b <b>0</b> sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C/1355</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: **CP Burrito** Vertical Datum: **NAVD 1988**

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

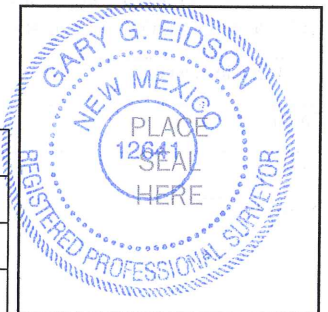
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>3617 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<b>3617 . 4</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>3617 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>3616 . 9</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>3617 . 4</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  
 Check here if attachments.

Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 318-1157</b>
Date <b>11/23/2015</b>			



**ELEVATION CERTIFICATE, page 2**

**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.  
1118 N. Llano Dr.

Policy Number:

City  
Hobbs

State  
NM

ZIP Code  
88240

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 Lowest elevation of machinery or equipment servicing the building are the appliances located inside of the building.

Signature

*Ray A. Edman*

Date 11/23/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.  
b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.

E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name

Title

Community Name

Telephone

Signature

Date

Comments

Check here if attachments.

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>FOR INSURANCE COMPANY USE</b>		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1118 N. Llano Dr.	Policy Number:		
City Hobbs	State NM	ZIP Code 88240	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.

11/21/2015 Front View



11/21/2015 Rear View



FILE: 03262980.08o 000034794

NGS OPUS SOLUTION REPORT CP BURRITO

All computed coordinate accuracies are listed as peak-to-peak values.
For additional information: http://www.ngs.noaa.gov/OPUS/about.html#accuracy

USER: gjeidson@cox.net DATE: December 18, 2009
RINEX FILE: 0326298t.08o TIME: 23:09:51 UTC

SOFTWARE: page5 0909.08 master40.pl 081023 START: 2008/10/24 19:39:00
EPHEMERIS: igs15025.eph [precise] STOP: 2008/10/24 23:29:00
NAV FILE: brdc2980.08n OBS USED: 7719 / 7898 : 98%
ANT NAME: TRM41249.00 NONE # FIXED AMB: 36 / 39 : 92%
ARP HEIGHT: 1.4088 OVERALL RMS: 0.017(m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2008.8139)

X: -1220289.835(m) 0.042(m) -1220290.540(m) 0.042(m)
Y: -5232780.653(m) 0.042(m) -5232779.258(m) 0.042(m)
Z: 3426980.388(m) 0.047(m) 3426980.231(m) 0.047(m)

LAT: 32 42 14.95292 0.031(m) 32 42 14.96964 0.031(m)
E LON: 256 52 23.40104 0.050(m) 256 52 23.36252 0.050(m)
W LON: 103 7 36.59896 0.050(m) 103 7 36.63748 0.050(m)
EL HGT: 1081.736m 0.052(m) 1080.643(m) 0.052(m)
ORTHO HGT: 1103.335m 0.059(m) [NAVD88 (Computed using GEOID03)]

UTM COORDINATES STATE PLANE COORDINATES
UTM (Zone 13) SPC (3001 NM E)
Northing (Y) [meters] 3620041.206 189590.189m
Easting (X) [meters] 675578.221 278119.342m
Convergence [degrees] 1.01233363 0.65194291
Point Scale 0.99998014 1.00006682
Combined Factor 0.99981033 0.99989700

US NATIONAL GRID DESIGNATOR: 13SFS7557820041(NAD 83)

BASE STATIONS USED
PID DESIGNATION LATITUDE LONGITUDE DISTANCE(m)
DG6517 NMRO ROSWELL CORS ARP N332341.834 W1043520.737 156617.7
DF5393 TXOD ODESSA RRP2 CORS ARP N315226.112 W1021854.556 119689.2
DF5391 TXLU LUBBOCK RRP2 CORS ARP N333207.490 W1015034.162 151210.9

NEAREST NGS PUBLISHED CONTROL POINT
CV0845 HOBBS GENERAL TEL MICROWAVE N324212.827 W1030812.966 948.6

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

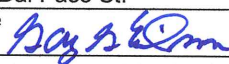
IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Adalberto Caballero</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1118 N. Steven Dr.</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 14, Block 21, Second Unit, Taylor Ranch Addition, City of Hobbs, Lea County, New Mexico</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>32.711936 N</u> Long. <u>103.113961 W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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>1A</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) _____ sq ft		a) Square footage of attached garage <u>280</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>
c) Total net area of flood openings in A8.b _____ sq ft		c) Total net area of flood openings in A9.b <u>0</u> sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C1355</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>	
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____						
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____						
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <u>CP BURRITO</u> Vertical Datum: <u>NAVD 1988</u>	
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>3613 . 9</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____ <input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____ <input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>3613 . 2</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>3613 . 9</u> <input type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3613 . 1</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>3613 . 6</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____ <input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature 		ZIP Code <b>88240</b>	Telephone <b>(575) 393-3117</b>
Date <b>12/22/2015</b>			



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1118 N. Steven Dr.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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 Lowest elevation of machinery or equipment servicing the building are the the appliances located inside the building.

Signature *Ray B. Egan* Date 12/22/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____

Comments \_\_\_\_\_  Check here if attachments.



**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1118 N. Steven Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

Front View (12/16/2015)



Rear View (12/16/2015)



FILE: 03262980.08o 000034794

NGS OPUS SOLUTION REPORT CP BURRITO

All computed coordinate accuracies are listed as peak-to-peak values.
For additional information: http://www.ngs.noaa.gov/OPUS/about.html#accuracy

USER: gjeidson@cox.net DATE: December 18, 2009
RINEX FILE: 0326298t.08o TIME: 23:09:51 UTC

SOFTWARE: page5 0909.08 master40.pl 081023 START: 2008/10/24 19:39:00
EPHEMERIS: igs15025.eph [precise] STOP: 2008/10/24 23:29:00
NAV FILE: brdc2980.08n OBS USED: 7719 / 7898 : 98%
ANT NAME: TRM41249.00 NONE # FIXED AMB: 36 / 39 : 92%
ARP HEIGHT: 1.4088 OVERALL RMS: 0.017(m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2008.8139)

X: -1220289.835(m) 0.042(m) -1220290.540(m) 0.042(m)
Y: -5232780.653(m) 0.042(m) -5232779.258(m) 0.042(m)
Z: 3426980.388(m) 0.047(m) 3426980.231(m) 0.047(m)

LAT: 32 42 14.95292 0.031(m) 32 42 14.96964 0.031(m)
E LON: 256 52 23.40104 0.050(m) 256 52 23.36252 0.050(m)
W LON: 103 7 36.59896 0.050(m) 103 7 36.63748 0.050(m)
EL HGT: 1081.736m 0.052(m) 1080.643(m) 0.052(m)
ORTHO HGT: 1103.335m 0.059(m) [NAVD88 (Computed using GEOID03)]

UTM COORDINATES STATE PLANE COORDINATES
UTM (Zone 13) SPC (3001 NM E)
Northing (Y) [meters] 3620041.206 189590.189m
Easting (X) [meters] 675578.221 278119.342m
Convergence [degrees] 1.01233363 0.65194291
Point Scale 0.99998014 1.00006682
Combined Factor 0.99981033 0.99989700

US NATIONAL GRID DESIGNATOR: 13SFS7557820041(NAD 83)

BASE STATIONS USED

PID DESIGNATION LATITUDE LONGITUDE DISTANCE(m)
DG6517 NMRO ROSWELL CORS ARP N332341.834 W1043520.737 156617.7
DF5393 TXOD ODESSA RRP2 CORS ARP N315226.112 W1021854.556 119689.2
DF5391 TXLU LUBBOCK RRP2 CORS ARP N333207.490 W1015034.162 151210.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0845 HOBBS GENERAL TEL MICROWAVE N324212.827 W1030812.966 948.6

This position and the above vector components were computed without any
knowledge by the National Geodetic Survey regarding the equipment or
field operating procedures used.

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Felix Palmero</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1121 E. Lincoln Rd.</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>The E. 26' of Lot 4, all of Lot 5 and the W. 11' of Lot 6, Block 14, Third Unit, Bel Aire Addition, City of Hobbs, NM</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32.719644 N</b> Long. <b>103.122246 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft		a) Square footage of attached garage <b>N/A</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq ft		c) Total net area of flood openings in A9.b _____ sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>
B4. Map/Panel Number <b>35025C/1355</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP BURITTO</b> Vertical Datum: <b>NAVD 1988</b>	
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <b>3620 . 5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor <b>3620 . 9</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <b>3620 . 4</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <b>3619 . 9</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <b>3620 . 0</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.				
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Check here if attachments.				
Certifier's Name <b>Gary Eidson</b>	License Number <b>12641</b>			
Title <b>President</b>	Company Name <b>John West Surveying Company</b>			
Address <b>412 N. Dal Paso St.</b>	City <b>Hobbs</b>	State <b>NM</b>		ZIP Code <b>88240</b>
Signature <i>Gary G. Eidson</i>	Date <b>01/05/2015</b>	Telephone <b>(575) 318-1157</b>		

**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1121 E. Lincoln Rd.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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  Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the east side of the building.

Signature *Ray G. Quinn* Date 01/05/2015

**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, crawlspace, or enclosure) is 0 . 5  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is 0 . 6  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 0 . 4  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 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. 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 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: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____		
G9. BFE or (in Zone AO) depth of flooding at the building site: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____		
G10. Community's design flood elevation: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____		

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1121 E. Lincoln Rd.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

Front View 12/30/2014



Rear View 12/30/2014



FILE: 03262980.08o 000034794

NGS OPUS SOLUTION REPORT CP BURRITO

All computed coordinate accuracies are listed as peak-to-peak values.
For additional information: http://www.ngs.noaa.gov/OPUS/about.html#accuracy

USER: gjeidson@cox.net DATE: December 18, 2009
RINEX FILE: 0326298t.08o TIME: 23:09:51 UTC

SOFTWARE: page5 0909.08 master40.pl 081023 START: 2008/10/24 19:39:00
EPHEMERIS: igs15025.eph [precise] STOP: 2008/10/24 23:29:00
NAV FILE: brdc2980.08n OBS USED: 7719 / 7898 : 98%
ANT NAME: TRM41249.00 NONE # FIXED AMB: 36 / 39 : 92%
ARP HEIGHT: 1.4088 OVERALL RMS: 0.017(m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2008.8139)

X: -1220289.835(m) 0.042(m) -1220290.540(m) 0.042(m)
Y: -5232780.653(m) 0.042(m) -5232779.258(m) 0.042(m)
Z: 3426980.388(m) 0.047(m) 3426980.231(m) 0.047(m)

LAT: 32 42 14.95292 0.031(m) 32 42 14.96964 0.031(m)
E LON: 256 52 23.40104 0.050(m) 256 52 23.36252 0.050(m)
W LON: 103 7 36.59896 0.050(m) 103 7 36.63748 0.050(m)
EL HGT: 1081.736m 0.052(m) 1080.643(m) 0.052(m)
ORTHO HGT: 1103.335m 0.059(m) [NAVD88 (Computed using GEOID03)]

UTM COORDINATES STATE PLANE COORDINATES
UTM (Zone 13) SPC (3001 NM E)
Northing (Y) [meters] 3620041.206 189590.189m
Easting (X) [meters] 675578.221 278119.342m
Convergence [degrees] 1.01233363 0.65194291
Point Scale 0.99998014 1.00006682
Combined Factor 0.99981033 0.99989700

US NATIONAL GRID DESIGNATOR: 13SFS7557820041(NAD 83)

BASE STATIONS USED

PID DESIGNATION LATITUDE LONGITUDE DISTANCE(m)
DG6517 NMRO ROSWELL CORS ARP N332341.834 W1043520.737 156617.7
DF5393 TXOD ODESSA RRP2 CORS ARP N315226.112 W1021854.556 119689.2
DF5391 TXLU LUBBOCK RRP2 CORS ARP N333207.490 W1015034.162 151210.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0845 HOBBS GENERAL TEL MICROWAVE N324212.827 W1030812.966 948.6

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name:  
 GL Green and Associates

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
 1503 W. Kyleigh

Company NAIC Number:

City: Hobbs State: NM ZIP Code: 88240

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
 Lot 38, Windsor Estates Subdivision

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. N 32°45'25.14" Long. W103°9'14.80" Horizontal Datum:  NAD 1927  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 1B

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) N/A sq ft
- b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A
- c) Total net area of flood openings in A8.b N/A sq in
- d) Engineered flood openings?  Yes  No

A9. For a building with an attached garage:

- a) Square footage of attached garage 575 sq ft
- b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A
- c) Total net area of flood openings in A9.b N/A sq in
- d) Engineered flood openings?  Yes  No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
 City of Hobbs 350029

B2. County Name  
 Lea

B3. State  
 New Mexico

B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s) AO	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 1' depth (3651.6')
35025C1170	D	12/16/2008	12/16/2008		

B10. Indicate the source of the Base Flood Elevation (BFE) data base or base flood depth entered in Item B9.

- FIS Profile  FIRM  Community Determined  Other/Source: \_\_\_\_\_

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 Date: \_\_\_\_\_  CBRS  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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: City of Hobbs Base Station Vertical Datum: NAVD 88

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 3652.8  feet  meters
- b) Top of the next higher floor N/A  feet  meters
- c) Bottom of the lowest horizontal structural member (V Zones only) N/A  feet  meters
- d) Attached garage (top of slab) 3652.5  feet  meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 3652.7  feet  meters
- f) Lowest adjacent (finished) grade next to building (LAG) 3650.3  feet  meters
- g) Highest adjacent (finished) grade next to building (HAG) 3650.7  feet  meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N/A  feet  meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No
- Check here if attachments.

Certifier's Name: William M. Hicks, III

License Number: 12348

Title: Principal Surveyor

Company Name: Pettigrew & Associates, P.A. Project No. 2014.1167

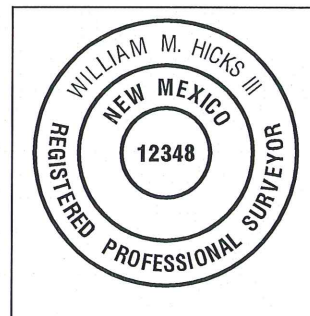
Address: 100 E. Navajo-Suite 100

City: Hobbs State: NM ZIP Code: 88240

Signature: *William M. Hicks*

Date: 4/10/2015

Telephone: 575-393-9827



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1503 W. Kyleigh	Policy Number:
City: Hobbs State: NM ZIP Code: 88240	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: The property is partially inundated by the flood hazard and the hazard is not conveyed by the street, therefore, the BFE should be determined by adding the flood depth (1') to the lowest elevation on the lot (3650.6) to compute the BFE of 3651.6'. The lowest machinery servicing the structure is an HVAC unit on the outside of the structure and elevated above natural ground.

Signature *William M. Hicks* Date 4/10/2015

**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, crawlspace, or enclosure) is 2.1  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is 2.5  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is NA  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is 1.8  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is 2.0  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: William M. Hicks, III

Address: 100 E. Navajo-Suite 100 City: Hobbs State: NM ZIP Code: 88240

Signature: *William M. Hicks* Date: 4/10/2015 Telephone: 575-393-3827

Comments: See comments in Section "D".

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–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 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–G10) 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.



# Building Photographs

See Instructions for Item A6.

**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. Project No.  
1503 W. Kyleigh Project 2014.1167

Policy Number:

City: Hobbs

State: NM ZIP Code: 88240

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.



Front of lot - Looking South  
Picture taken 4/6/2015

# Building Photographs

See Instructions for Item A6.

**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. Project No.  
1503 W. Kyleigh Project 2014.1167

Policy Number:

City: Hobbs

State: NM ZIP Code: 88240

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.



Back of lot- Looking Northwest  
Picture taken 4/6/2015

# ELEVATION CERTIFICATE

**Important: Read the instructions on pages 1-9.**

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name:  
**GL Green and Associates**

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
 1512 W. Kyleigh

Company NAIC Number:

City: Hobbs State: NM ZIP Code: 88240

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
 Lot 21, Windsor Estates Subdivision

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. N 32°45'25.52" Long. W103°9'16.50" Horizontal Datum:  NAD 1927  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 1B

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) N/A sq ft
- b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A
- c) Total net area of flood openings in A8.b N/A sq in
- d) Engineered flood openings?  Yes  No

A9. For a building with an attached garage:

- a) Square footage of attached garage 575 sq ft
- b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A
- c) Total net area of flood openings in A9.b N/A sq in
- d) Engineered flood openings?  Yes  No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
 City of Hobbs 350029

B2. County Name  
 Lea

B3. State  
 New Mexico

B4. Map/Panel Number 35025C1170	B5. Suffix D	B6. FIRM Index Date 12/16/2008	B7. FIRM Panel Effective/Revised Date 12/16/2008	B8. Flood Zone(s) AO	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 3651.5' (1' depth)
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B10. Indicate the source of the Base Flood Elevation (BFE) data base or base flood depth entered in Item B9.

- FIS Profile  FIRM  Community Determined  Other/Source: \_\_\_\_\_

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 Date: \_\_\_\_\_  CBRS  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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: City of Hobbs Base Station Vertical Datum: NAVD 88

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 3652.9  feet  meters
- b) Top of the next higher floor N/A  feet  meters
- c) Bottom of the lowest horizontal structural member (V Zones only) N/A  feet  meters
- d) Attached garage (top of slab) 3652.6  feet  meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 3652.7  feet  meters
- f) Lowest adjacent (finished) grade next to building (LAG) 3650.7  feet  meters
- g) Highest adjacent (finished) grade next to building (HAG) 3651.5  feet  meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N/A  feet  meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No
- Check here if attachments.

Certifier's Name: William M. Hicks, III

License Number: 12348

Title: Principal Surveyor

Company Name: Pettigrew & Associates, P.A. Project No. 2014.1077

Address: 100 E. Navajo, Suite 100

City: Hobbs

State: NM

ZIP Code: 88240

Signature: *William M. Hicks*

Date: 4/10/2015

Telephone: 575-393-9827



ELEVATION CERTIFICATE, page 2

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1512 W. Kyleigh	Policy Number:
City: Hobbs State: NM ZIP Code: 88240	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: The characteristics of the flood hazard indicate shallow sheet flooding and the property is partially inundated by the hazard. The BFE should be established by adding the flooding depth (1') to the lowest elevation on the lot. The resulting BFE is 3651.5. The lowest elevation of machinery servicing the building is a HVAC Unit.

Signature

*William M. Hicks*

Date 4/10/2015

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, crawlspace, or enclosure) is 1.4  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is 2.2  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is NA  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is 1.1  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is 1.2  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: William M. Hicks, III

Address: 100 E. Navajo-Suite 100

City: Hobbs

State: NM

ZIP Code: 88240

Signature:

*William M. Hicks*

Date: 4/10/2015

Telephone: 575-393-3827

Comments: See comments in Section "D".

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–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 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–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
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- 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name

Title

Community Name

Telephone

Signature

Date

Comments

Check here if attachments.

# Building Photographs

See Instructions for Item A6.

**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. Project No.  
1512 W. Kyleigh Project 2014.1077

Policy Number:

City: Hobbs

State: NM ZIP Code: 88240

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.



Front of lot - Looking South  
Picture taken 4/6/2015

# Building Photographs

See Instructions for Item A6.

**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. Project No.  
1512 W. Kyleigh Project 2014.1077

Policy Number:

City: Hobbs

State: NM ZIP Code: 88240

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.



Back of lot- Looking Northwest  
Picture taken 4/6/2015

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

### FOR INSURANCE COMPANY USE

A1. Building Owner's Name: <b>V &amp; A Real Estate, LLC</b>	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1516 N Brazos	Company NAIC Number:
City: Hobbs	State: NM ZIP Code: 88240

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
 Lot 5, Second Unit of Bel Aire Addition.

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. N32°42'57.45" Long. W103°07'10.49" Horizontal Datum:  NAD 1927  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 1B

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft	A9. For a building with an attached garage:
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>	a) Square footage of attached garage <u>N/A</u> sq ft
c) Total net area of flood openings in A8.b <u>N/A</u> sq in	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	c) Total net area of flood openings in A9.b <u>N/A</u> sq in
	d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number City of Hobbs 350029		B2. County Name Lea		B3. State New Mexico	
B4. Map/Panel Number 35025C1355	B5. Suffix D	B6. FIRM Index Date 12/16/2008	B7. FIRM Panel Effective/Revised Date 12/16/2008	B8. Flood Zone(s) AO	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 1' (3620.0')

B10. Indicate the source of the Base Flood Elevation (BFE) data base or base flood depth entered in Item B9.  
 FIS Profile  FIRM  Community Determined  Other/Source: \_\_\_\_\_

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 Date: \_\_\_\_\_  CBRS  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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: City of Hobbs Base Station Vertical Datum: NAVD 88  
 Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>3620.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>N/A</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>3619.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3619.0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>3619.3</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No

Check here if attachments.

Certifier's Name: William M. Hicks, III	License Number: 12348
Title: Principal Surveyor	Company Name: Pettigrew & Associates, P.A. Project No. 2015.1051
Address: 100 E. Navajo-Suite 100	City: Hobbs State: NM ZIP Code: 88240
Signature: <i>William M. Hicks</i>	Date: <u>3-18-2015</u> Telephone: 575-393-9827



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1516 N Brazos	Policy Number:
City: Hobbs State: NM ZIP Code: 88240	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 hazard characteristics indicate the lot partially is inundated by the flood hazard and the flood hazard is conveyed by the street. The BFE = 3620.0' is established 1' above the top back of curb elev. = 3619.0'. The lowest machinery servicing the structure is an HVAC unit on the outside of the structure and elevated above natural ground.

*William M. Hicks*  
Signature

*3-18-2015*  
Date

**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, crawlspace, or enclosure) is 0.8  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is 1.1  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is NA  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is NA  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is 0.1  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: William M. Hicks, III

Address: 100 E. Navajo-Suite 100 City: Hobbs State: NM ZIP Code: 88240

Signature: *William M. Hicks* Date: *3-18-2015* Telephone: 575-393-3827

Comments: See comments in Section "D".

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–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 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–G10) 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date
Comments	

Check here if attachments.



# Building Photographs

See Instructions for Item A6.

**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. Project No. 1516 N Brazos Project 2015.1051		
City: Hobbs	State: NM	ZIP Code: 88240

FOR INSURANCE COMPANY USE	
Policy Number:	
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.



Front of lot - Looking East  
Picture taken 3/13/2015

# Building Photographs

See Instructions for Item A6.

**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. Project No.  
 1516 N Brazos Project 2015.1051

Policy Number:

City: Hobbs

State: NM ZIP Code: 88240

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.



Back of lot- Looking West  
 Picture taken 3/13/2015

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

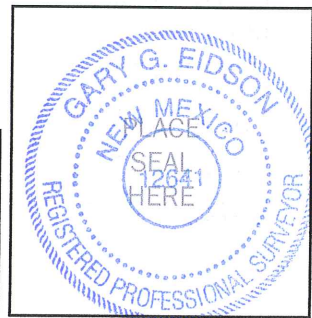
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A – PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Maricruz Frayre</b>	Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1521 N. Camino Real</b>	Company NAIC Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 1, Block 25, Sixteenth Unit, Lincoln Park Addition, City of Hobbs, Lea County, New Mexico.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32.737391 N</b> Long. <b>103.155551 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 _____		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft	a) Square footage of attached garage <b>483</b> sq ft	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____	
c) Total net area of flood openings in A8.b _____ sq ft	c) Total net area of flood openings in A9.b _____ sq ft	
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C/1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP NIPPY</b> Vertical Datum: <b>NAVD 1988</b>	
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <b>3642 . 5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) <b>3642 . 1</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <b>3642 . 3</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <b>3641 . 9</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <b>3642 . 0</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company Inc.</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 393-3117</b>
Date <b>04/20/2015</b>			



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1521 N. Camino Real			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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 Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the east side of the building.

Signature *Dany G. Gomez* Date 04/20/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____

Comments \_\_\_\_\_

Check here if attachments.

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1521 N. Camino Real			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

04/11/2015 Front View



04/11/2015 Garage View



NGS OPUS SOLUTION REPORT CP NIPPY

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All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: May 23, 2013  
RINEX FILE: 7318099t.13o TIME: 19:57:00 UTC

SOFTWARE: page5 1209.04 master32.pl 082112 START: 2013/04/09 19:12:00  
EPHEMERIS: igs17352.eph [precise] STOP: 2013/04/09 22:11:00  
NAV FILE: brdc0990.13n OBS USED: 6992 / 7369 : 95%  
ANT NAME: TRMR8\_GNSS3 NONE # FIXED AMB: 45 / 50 : 90%  
ARP HEIGHT: 1.558 OVERALL RMS: 0.013(m)

REF FRAME: NAD\_83(2011)(EPOCH:2010.0000) IGS08 (EPOCH:2013.2709)

X: -1222821.726(m) 0.007(m) -1222822.502(m) 0.007(m)  
Y: -5229635.801(m) 0.011(m) -5229634.398(m) 0.011(m)  
Z: 3430869.862(m) 0.008(m) 3430869.708(m) 0.008(m)

LAT: 32 44 44.78584 0.001(m) 32 44 44.80252 0.001(m)  
E LON: 256 50 21.27312 0.006(m) 256 50 21.23183 0.006(m)  
W LON: 103 9 38.72688 0.006(m) 103 9 38.76817 0.006(m)  
EL HGT: 1092.393(m) 0.014(m) 1091.310(m) 0.014(m)  
ORTHO HGT: 1114.007(m) 0.028(m) [NAVD88 (Computed using GEOID12A)]

UTM COORDINATES STATE PLANE COORDINATES

UTM (Zone 13) SPC (3001 NM E)

Northing (Y) [meters] 3624600.336 194170.157  
Easting (X) [meters] 672317.796 274887.386  
Convergence [degrees] 0.99511442 0.63432441  
Point Scale 0.99996615 1.00005794  
Combined Factor 0.99979467 0.99988645

US NATIONAL GRID DESIGNATOR: 13SFS7231724600(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DM4704	TXSO STANTON CORS ARP	N320828.201	W1014827.359	143845.2
DM4161	TXKM KERMIT CORS ARP	N315033.357	W1030631.257	100289.4
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	125381.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0272 R 35 N324424. W1030939. 642.8

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <b>Everado Garcia Lopez</b>		FOR INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. <b>1600 N. Fowler</b>		Policy Number:
City <b>Hobbs</b>	State <b>NM</b>	Company NAIC Number:
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 10, Block 17A, Seventh Unit, Broadmoor Addition, City of Hobbs, Lea Co., NM</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32 716807 N</b> Long. <b>103.135468 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft		a) Square footage of attached garage <b>198</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq ft		c) Total net area of flood openings in A9.b _____ sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C/1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: **CP Burrito** Vertical Datum: **NAVD 1988**

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>3626 . 5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<b>3626 . 1</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>3626 . 5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>3625 . 2</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>3625 . 7</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  
 Check here if attachments.

Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 318-1157</b>
Date <b>01/10/2015</b>			



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1600 N. Fowler			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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 Lowest elevation of machinery or equipment servicing the building are the appliances located inside of the building.

Signature *Ray B. Quinn* Date 01/10/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.



**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1600 N. Fowler			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

01/10/2015 Front View



01/10/2015 Rear View



FILE: 03262980.08o 000034794

NGS OPUS SOLUTION REPORT CP BURRITO

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All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.html#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: December 18, 2009  
RINEX FILE: 0326298t.08o TIME: 23:09:51 UTC

SOFTWARE: page5 0909.08 master40.pl 081023 START: 2008/10/24 19:39:00  
EPHEMERIS: igs15025.eph [precise] STOP: 2008/10/24 23:29:00  
NAV FILE: brdc2980.08n OBS USED: 7719 / 7898 : 98%  
ANT NAME: TRM41249.00 NONE # FIXED AMB: 36 / 39 : 92%  
ARP HEIGHT: 1.4088 OVERALL RMS: 0.017(m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2008.8139)

X: -1220289.835(m) 0.042(m) -1220290.540(m) 0.042(m)  
Y: -5232780.653(m) 0.042(m) -5232779.258(m) 0.042(m)  
Z: 3426980.388(m) 0.047(m) 3426980.231(m) 0.047(m)

LAT: 32 42 14.95292 0.031(m) 32 42 14.96964 0.031(m)  
E LON: 256 52 23.40104 0.050(m) 256 52 23.36252 0.050(m)  
W LON: 103 7 36.59896 0.050(m) 103 7 36.63748 0.050(m)  
EL HGT: 1081.736m 0.052(m) 1080.643(m) 0.052(m)  
ORTHO HGT: 1103.335m 0.059(m) [NAVD88 (Computed using GEOID03)]

	UTM COORDINATES	STATE PLANE COORDINATES
	UTM (Zone 13)	SPC (3001 NM E)
Northing (Y) [meters]	3620041.206	189590.189m
Easting (X) [meters]	675578.221	278119.342m
Convergence [degrees]	1.01233363	0.65194291
Point Scale	0.99998014	1.00006682
Combined Factor	0.99981033	0.99989700

US NATIONAL GRID DESIGNATOR: 13SFS7557820041(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DG6517	NMRO ROSWELL CORS ARP	N332341.834	W1043520.737	156617.7
DF5393	TXOD ODESSA RRP2 CORS ARP	N315226.112	W1021854.556	119689.2
DF5391	TXLU LUBBOCK RRP2 CORS ARP	N333207.490	W1015034.162	151210.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0845 HOBBS GENERAL TEL MICROWAVE N324212.827 W1030812.966 948.6

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Muscle Therapy Center</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1711 N. Jefferson St.</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 2, Block 1, Buena Vista Heights Addition, City of Hobbs, Lea County, New Mexico.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Non-Residential</b>		
A5. Latitude/Longitude: Lat. <b>37.718951 N</b> Long. <b>103.123394 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft	a) Square footage of attached garage <b>1000</b> sq ft	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>N/A</b>	
c) Total net area of flood openings in A8.b _____ sq ft	c) Total net area of flood openings in A9.b _____ sq ft	
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C/1355</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: **CP Coronado** Vertical Datum: **NAVD 1988**

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

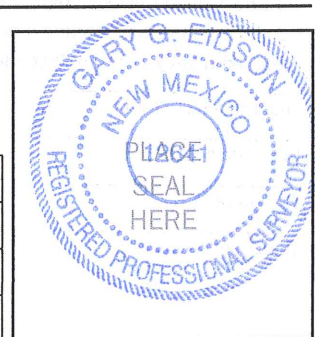
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>3619 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<b>3619 . 9</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>3619 . 2</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>3619 . 2</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>3620 . 2</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  
 Check here if attachments.

Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 318-1157</b>
Date <b>02/17/2005</b>			



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1711 N. Jefferson St.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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 Lowest elevation of machinery or equipment servicing the building is the eastern most A/C unit located on the south side of the building.

Signature *Ray S. Edmon* Date 02/17/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1711 N. Jefferson St.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

North & East side 2/11/2015



North & West Side 2/11/2015



FILE: 90251610.09o 000034755

NGS OPUS SOLUTION REPORT CP CORONADO

All computed coordinate accuracies are listed as peak-to-peak values.
For additional information: http://www.ngs.noaa.gov/OPUS/about.html#accuracy

USER: gjeidson@cox.net DATE: December 18, 2009
RINEX FILE: 90251610.09o TIME: 21:51:18 UTC

SOFTWARE: page5 0909.08 master28.pl 081023 START: 2009/06/10 14:32:00
EPHEMERIS: igs15353.eph [precise] STOP: 2009/06/10 22:14:00
NAV FILE: brdc1610.09n OBS USED: 18910 / 19931 : 95%
ANT NAME: TRM41249.00 NONE # FIXED AMB: 97 / 113 : 86%
ARP HEIGHT: 1.3873 OVERALL RMS: 0.021(m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2009.4405)
X: -1219212.613(m) 0.003(m) -1219213.326(m) 0.003(m)
Y: -5231349.623(m) 0.014(m) -5231348.228(m) 0.014(m)
Z: 3429538.942(m) 0.016(m) 3429538.781(m) 0.016(m)
LAT: 32 43 53.55805 0.021(m) 32 43 53.57466 0.021(m)
E LON: 256 52 51.20523 0.006(m) 256 52 51.16641 0.006(m)
W LON: 103 7 8.79477 0.006(m) 103 7 8.83359 0.006(m)
EL HGT: 1086.325(m) 0.009(m) 1085.232(m) 0.009(m)
ORTHO HGT: 1107.925(m) 0.030(m) [NAVD88 (Computed using GEOID03)]

UTM COORDINATES STATE PLANE COORDINATES
UTM (Zone 13) SPC (3001 NM E)
Northing (Y) [meters] 3623091.068 192636.037
Easting (X) [meters] 676248.362 278808.720
Convergence [degrees] 1.01726634 0.65660558
Point Scale 0.99998304 1.00006875
Combined Factor 0.99981252 0.99989821

US NATIONAL GRID DESIGNATOR: 13SFS7624823091(NAD 83)

BASE STATIONS USED
PID DESIGNATION LATITUDE LONGITUDE DISTANCE(m)
DG6517 NMRO ROSWELL CORS ARP N332341.834 W1043520.737 155771.0
DL2764 TXOE ODESSA CORS ARP N315224.503 W1021850.232 121689.5
DF5391 TXLU LUBBOCK RRP2 CORS ARP N333207.490 W1015034.162 148785.6

NEAREST NGS PUBLISHED CONTROL POINT
CV0849 HOBBS N MUNICIPAL TANK N324319.019 W1030824.555 2241.6

This position and the above vector components were computed without any
knowledge by the National Geodetic Survey regarding the equipment or
field operating procedures used.

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

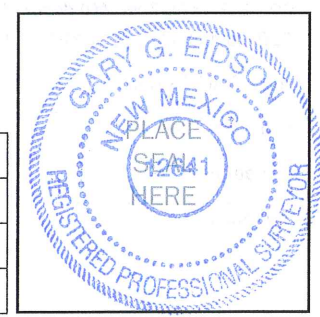
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION			FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Phillip Dominguez</b>		Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1726 N. Breckon Dr.</b>		Company NAIC Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 23, Block 24, Second Unit, Taylor Ranch Addition, City of Hobbs, Lea County, New Mexico</b>			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>			
A5. Latitude/Longitude: Lat. <u>32.719483</u> Long. <u>103.116128</u>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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>1A</u>			
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:	
a) Square footage of crawlspace or enclosure(s) _____ sq ft		a) Square footage of attached garage <u>306</u> sq ft	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>	
c) Total net area of flood openings in A8.b _____ sq ft		c) Total net area of flood openings in A9.b <u>0</u> sq ft	
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C1355</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <u>CP CORONADO</u> Vertical Datum: <u>NAVD 1988</u> Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>3619.5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor _____	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) <u>3618.9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <u>3619.5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <u>3618.9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <u>3619.0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 393-3117</b>
Date <b>04/09/2015</b>			



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1726 N. Breckon Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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: Lowest elevation of machinery or equipment servicing the building are the appliances located inside of the building.

Signature: *Boyd E. Omm* Date: 04/09/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments

Check here if attachments.



See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1726 N. Breckon Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

Front View (4/7/2015)

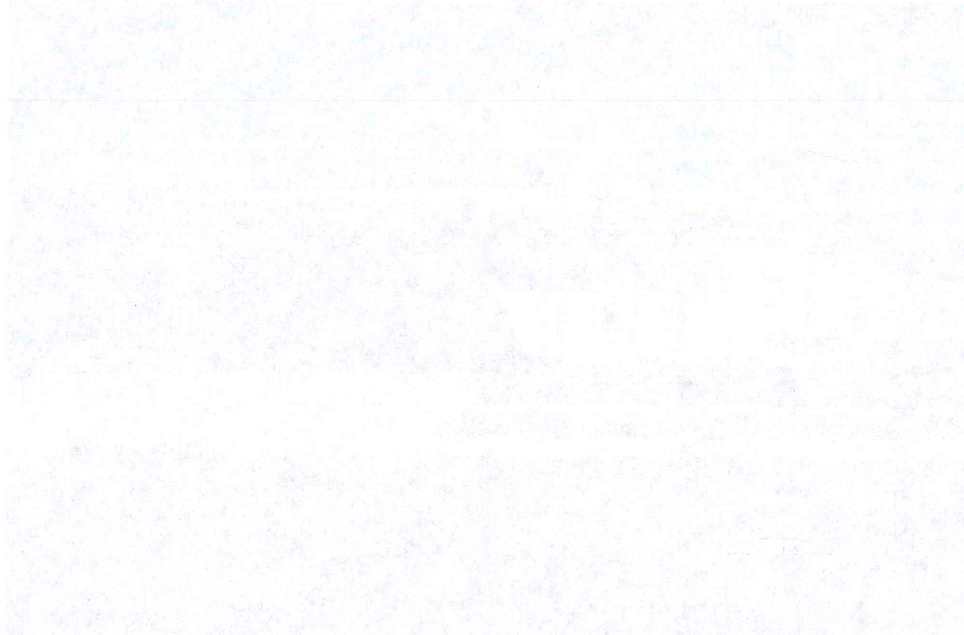


Rear View (4/7/2015)



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1726 N. Breckon Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	Company NAIC Number:

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.



FILE: 90251610.09o 000034755

NGS OPUS SOLUTION REPORT CP CORONADO

All computed coordinate accuracies are listed as peak-to-peak values. For additional information: <http://www.ngs.noaa.gov/OPUS/about.html#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: December 18, 2009  
RINEX FILE: 9025161o.09o TIME: 21:51:18 UTC

SOFTWARE: page5 0909.08 master28.pl 081023 START: 2009/06/10 14:32:00  
EPHEMERIS: igs15353.eph [precise] STOP: 2009/06/10 22:14:00  
NAV FILE: brdc1610.09n OBS USED: 18910 / 19931 : 95%  
ANT NAME: TRM41249.00 NONE # FIXED AMB: 97 / 113 : 86%  
ARP HEIGHT: 1.3873 OVERALL RMS: 0.021(m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2009.4405)

X: -1219212.613(m) 0.003(m) -1219213.326(m) 0.003(m)  
Y: -5231349.623(m) 0.014(m) -5231348.228(m) 0.014(m)  
Z: 3429538.942(m) 0.016(m) 3429538.781(m) 0.016(m)

LAT: 32 43 53.55805 0.021(m) 32 43 53.57466 0.021(m)  
E LON: 256 52 51.20523 0.006(m) 256 52 51.16641 0.006(m)  
W LON: 103 7 8.79477 0.006(m) 103 7 8.83359 0.006(m)  
EL HGT: 1086.325(m) 0.009(m) 1085.232(m) 0.009(m)  
ORTHO HGT: 1107.925(m) 0.030(m) [NAVD88 (Computed using GEOID03)]

	UTM COORDINATES	STATE PLANE COORDINATES
	UTM (Zone 13)	SPC (3001 NM E)
Northing (Y) [meters]	3623091.068	192636.037
Easting (X) [meters]	676248.362	278808.720
Convergence [degrees]	1.01726634	0.65660558
Point Scale	0.99998304	1.00006875
Combined Factor	0.99981252	0.99989821

US NATIONAL GRID DESIGNATOR: 13SFS7624823091(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DG6517	NMRO ROSWELL CORS ARP	N332341.834	W1043520.737	155771.0
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	121689.5
DF5391	TXLU LUBBOCK RRP2 CORS ARP	N333207.490	W1015034.162	148785.6

NEAREST NGS PUBLISHED CONTROL POINT

CV0849	HOBBS N MUNICIPAL TANK	N324319.019	W1030824.555	2241.6
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This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>David A. Maupin</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1730 N. Penasco Dr.</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 34, Block 10, Taylor Ranch Addition. City of Hobbs, Lea County, New Mexico.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32.719558 N</b> Long. <b>103.118394 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) _____ sq ft		a) Square footage of attached garage <b>253</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq ft		c) Total net area of flood openings in A9.b _____ sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C/1355</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP Burrito</b> Vertical Datum: <b>NAVD 1988</b>	
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <b>3620 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) <b>3620 . 3</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <b>3620 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <b>3619 . 3</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <b>3619 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.				
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Check here if attachments.				
Certifier's Name <b>Gary Eidson</b>	License Number <b>12641</b>			
Title <b>President</b>	Company Name <b>John West Surveying Company</b>			
Address <b>412 N. Dal Paso St.</b>	City <b>Hobbs</b>	State <b>NM</b>		ZIP Code <b>88240</b>
Signature <i>Gary G. Eidson</i>	Date <b>11/03/2014</b>	Telephone <b>(575) 318-1157</b>		

**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1730 N. Penasco Dr.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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 Lowest elevation of machinery or equipment servicing the building are the appliances located in the building.

Signature *Ray S. Edm* Date 11/03/2014

**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, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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
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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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments \_\_\_\_\_

Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1730 N. Penasco Dr.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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.

Front View 11/01/2014



Rear View 11/01/2014



FILE: 03262980.08o 000034794

NGS OPUS SOLUTION REPORT CP BURRITO

All computed coordinate accuracies are listed as peak-to-peak values. For additional information: <http://www.ngs.noaa.gov/OPUS/about.html#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: December 18, 2009  
RINEX FILE: 0326298t.08o TIME: 23:09:51 UTC

SOFTWARE: page5 0909.08 master40.pl 081023 START: 2008/10/24 19:39:00  
EPHEMERIS: igs15025.eph [precise] STOP: 2008/10/24 23:29:00  
NAV FILE: brdc2980.08n OBS USED: 7719 / 7898 : 98%  
ANT NAME: TRM41249.00 NONE # FIXED AMB: 36 / 39 : 92%  
ARP HEIGHT: 1.4088 OVERALL RMS: 0.017 (m)

REF FRAME: NAD\_83 (CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2008.8139)

X: -1220289.835 (m) 0.042 (m) -1220290.540 (m) 0.042 (m)  
Y: -5232780.653 (m) 0.042 (m) -5232779.258 (m) 0.042 (m)  
Z: 3426980.388 (m) 0.047 (m) 3426980.231 (m) 0.047 (m)

LAT: 32 42 14.95292 0.031 (m) 32 42 14.96964 0.031 (m)  
E LON: 256 52 23.40104 0.050 (m) 256 52 23.36252 0.050 (m)  
W LON: 103 7 36.59896 0.050 (m) 103 7 36.63748 0.050 (m)  
EL HGT: 1081.736m 0.052 (m) 1080.643 (m) 0.052 (m)  
ORTHO HGT: 1103.335m 0.059 (m) [NAVD88 (Computed using GEOID03)]

	UTM COORDINATES	STATE PLANE COORDINATES
	UTM (Zone 13)	SPC (3001 NM E)
Northing (Y) [meters]	3620041.206	189590.189m
Easting (X) [meters]	675578.221	278119.342m
Convergence [degrees]	1.01233363	0.65194291
Point Scale	0.99998014	1.00006682
Combined Factor	0.99981033	0.99989700

US NATIONAL GRID DESIGNATOR: 13SFS7557820041(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE (m)
DG6517	NMRO ROSWELL CORS ARP	N332341.834	W1043520.737	156617.7
DF5393	TXOD ODESSA RRP2 CORS ARP	N315226.112	W1021854.556	119689.2
DF5391	TXLU LUBBOCK RRP2 CORS ARP	N333207.490	W1015034.162	151210.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0845	HOBBS GENERAL TEL MICROWAVE	N324212.827	W1030812.966	948.6
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This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION			FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Jessica Llanez</b>		Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1734 N. Steven Dr.</b>		Company NAIC Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 1, Block 26, Second Unit, Taylor Ranch Addition, City of Hobbs, Lea County, NM.</b>			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>			
A5. Latitude/Longitude: Lat. <b>32.719645 N</b> Long. <b>103.114031 W</b>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>			
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:	
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft		a) Square footage of attached garage <b>N/A</b> sq ft	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____	
c) Total net area of flood openings in A8.b _____ sq ft		c) Total net area of flood openings in A9.b _____ sq ft	
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C/1355</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP BURRITO</b> Vertical Datum: <b>NAVD 1988</b>		
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.		
		Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>3618 . 0</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>3617 . 7</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>3617 . 0</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>3617 . 5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 318-1157</b>
Date <b>01/08/2015</b>			





**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1734 N. Steven Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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 Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the east side of the building.

Signature *Ray R. Quinn* Date 01/08/2015

**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, crawlspace, or enclosure) is 0 . 5  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is 1 . 0  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 0 . 2  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 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. 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 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 _____
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- 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1734 N. Steven Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

Front View 01/08/2015



Rear View 01/08/2015



FILE: 03262980.08o 000034794

NGS OPUS SOLUTION REPORT CP BURRITO

All computed coordinate accuracies are listed as peak-to-peak values.
For additional information: http://www.ngs.noaa.gov/OPUS/about.html#accuracy

USER: gjeidson@cox.net DATE: December 18, 2009
RINEX FILE: 0326298t.08o TIME: 23:09:51 UTC

SOFTWARE: page5 0909.08 master40.pl 081023 START: 2008/10/24 19:39:00
EPHEMERIS: igs15025.eph [precise] STOP: 2008/10/24 23:29:00
NAV FILE: brdc2980.08n OBS USED: 7719 / 7898 : 98%
ANT NAME: TRM41249.00 NONE # FIXED AMB: 36 / 39 : 92%
ARP HEIGHT: 1.4088 OVERALL RMS: 0.017(m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2008.8139)

X: -1220289.835(m) 0.042(m) -1220290.540(m) 0.042(m)
Y: -5232780.653(m) 0.042(m) -5232779.258(m) 0.042(m)
Z: 3426980.388(m) 0.047(m) 3426980.231(m) 0.047(m)

LAT: 32 42 14.95292 0.031(m) 32 42 14.96964 0.031(m)
E LON: 256 52 23.40104 0.050(m) 256 52 23.36252 0.050(m)
W LON: 103 7 36.59896 0.050(m) 103 7 36.63748 0.050(m)
EL HGT: 1081.736m 0.052(m) 1080.643(m) 0.052(m)
ORTHO HGT: 1103.335m 0.059(m) [NAVD88 (Computed using GEOID03)]

UTM COORDINATES STATE PLANE COORDINATES
UTM (Zone 13) SPC (3001 NM E)
Northing (Y) [meters] 3620041.206 189590.189m
Easting (X) [meters] 675578.221 278119.342m
Convergence [degrees] 1.01233363 0.65194291
Point Scale 0.99998014 1.00006682
Combined Factor 0.99981033 0.99989700

US NATIONAL GRID DESIGNATOR: 13SFS7557820041(NAD 83)

BASE STATIONS USED

PID DESIGNATION LATITUDE LONGITUDE DISTANCE(m)
DG6517 NMRO ROSWELL CORS ARP N332341.834 W1043520.737 156617.7
DF5393 TXOD ODESSA RRP2 CORS ARP N315226.112 W1021854.556 119689.2
DF5391 TXLU LUBBOCK RRP2 CORS ARP N333207.490 W1015034.162 151210.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0845 HOBBS GENERAL TEL MICROWAVE N324212.827 W1030812.966 948.6

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE


**IMPORTANT:** Follow the instructions on pages 1-9.

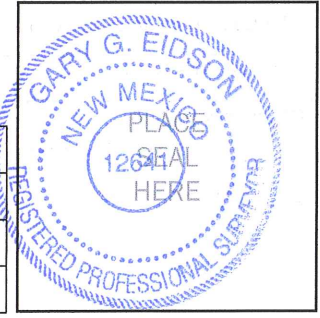
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>James Grimes</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or R.O. Route and Box No. <b>2320 N. Cielo Dr.</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 4, Block 2, First Unit, Norte Vista Addition, City of Hobbs, Lea County, New Mexico.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32 726653 N</b> Long. <b>103.139132 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft	a) Square footage of attached garage <b>324</b> sq ft	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____	
c) Total net area of flood openings in A8.b _____ sq ft	c) Total net area of flood openings in A9.b _____ sq ft	
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>
B4. Map/Panel Number <b>35025C/1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/ Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP Coronado</b> Vertical Datum: <b>NAVD 1988</b>	
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <b>3632 . 4</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) <b>3631 . 9</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <b>3631 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <b>3631 . 4</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <b>3631 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>	Company Name <b>John West Surveying Company</b>		
Address <b>412 N. Dal Paso St.</b>	City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
Signature 	Date <b>01/27/2015</b>	Telephone <b>(575) 318-1157</b>	



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2320 N. Cielo Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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  Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the north side of the building.

Signature Bob G. Eason Date 01/27/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building: _____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____
G9. BFE or (in Zone AO) depth of flooding at the building site: _____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____
G10. Community's design flood elevation: _____ . _____	<input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2320 N. Cielo Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

Front View 1/27/15



Rear View 1/27/15



FILE: 90251610.09o 000034755

NGS OPUS SOLUTION REPORT CP CORONADO

=====

All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.html#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: December 18, 2009  
RINEX FILE: 90251610.09o TIME: 21:51:18 UTC

SOFTWARE: page5 0909.08 master28.pl 081023 START: 2009/06/10 14:32:00  
EPHEMERIS: igs15353.eph [precise] STOP: 2009/06/10 22:14:00  
NAV FILE: brdc1610.09n OBS USED: 18910 / 19931 : 95%  
ANT NAME: TRM41249.00 NONE # FIXED AMB: 97 / 113 : 86%  
ARP HEIGHT: 1.3873 OVERALL RMS: 0.021(m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2009.4405)

X: -1219212.613(m) 0.003(m) -1219213.326(m) 0.003(m)  
Y: -5231349.623(m) 0.014(m) -5231348.228(m) 0.014(m)  
Z: 3429538.942(m) 0.016(m) 3429538.781(m) 0.016(m)

LAT: 32 43 53.55805 0.021(m) 32 43 53.57466 0.021(m)  
E LON: 256 52 51.20523 0.006(m) 256 52 51.16641 0.006(m)  
W LON: 103 7 8.79477 0.006(m) 103 7 8.83359 0.006(m)  
EL HGT: 1086.325(m) 0.009(m) 1085.232(m) 0.009(m)  
ORTHO HGT: 1107.925(m) 0.030(m) [NAVD88 (Computed using GEOID03)]

	UTM COORDINATES	STATE PLANE COORDINATES
	UTM (Zone 13)	SPC (3001 NM E)
Northing (Y) [meters]	3623091.068	192636.037
Easting (X) [meters]	676248.362	278808.720
Convergence [degrees]	1.01726634	0.65660558
Point Scale	0.99998304	1.00006875
Combined Factor	0.99981252	0.99989821

US NATIONAL GRID DESIGNATOR: 13SFS7624823091(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DG6517	NMRO ROSWELL CORS ARP	N332341.834	W1043520.737	155771.0
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	121689.5
DF5391	TXLU LUBBOCK RRP2 CORS ARP	N333207.490	W1015034.162	148785.6

NEAREST NGS PUBLISHED CONTROL POINT

CV0849 HOBBS N MUNICIPAL TANK N324319.019 W1030824.555 2241.6

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

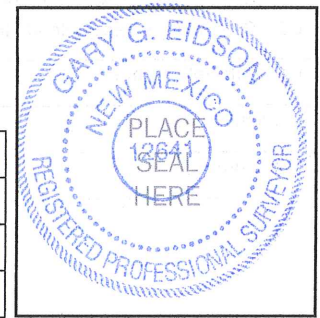
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <u>Jay Collins</u>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>2324 N. Kingsley Dr.</u>		Company NAIC Number:
City <u>Hobbs</u>	State <u>NM</u>	ZIP Code <u>88240</u>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>A tract of land in the SW/4 of Section 22, Township 18 South, Range 18 South, N.M.P.M., Lea County, New Mexico</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>32 727046</u> Long. <u>103.141528</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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>1A</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) _____ sq ft		a) Square footage of attached garage _____ sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq ft		c) Total net area of flood openings in A9.b _____ sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <u>City of Hobbs 350029</u>			B2. County Name <u>Lea</u>		B3. State <u>NM</u>
B4. Map/Panel Number <u>35025C1335</u>	B5. Suffix <u>D</u>	B6. FIRM Index Date <u>12/16/2008</u>	B7. FIRM Panel Effective/ Revised Date <u>12/16/2008</u>	B8. Flood Zone(s) <u>AO</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>1'</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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <u>CP CORONADO</u> Vertical Datum: <u>NAVD 1988</u> Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>3634 . 8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <u>3634 . 3</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <u>3634 . 0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <u>3634 . 8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <u>Gary Eidson</u>		License Number <u>12641</u>	
Title <u>President</u>		Company Name <u>John West Surveying Company</u>	
Address <u>412 N. Dal Paso St.</u>		City <u>Hobbs</u>	State <u>NM</u>
Signature <u>Gary Eidson</u>		Date <u>06/18/2015</u>	ZIP Code <u>88240</u>
		Telephone <u>(575) 393-3117</u>	





**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>2324 N. Kingsley Dr.</b>			Policy Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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 **Lowest elevation of machinery or equipment servicing the building is the base of the air conditioning unit located at the rear of the building.**

Signature *Dany S Edom* Date **06/18/2015**

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments \_\_\_\_\_

Check here if attachments.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2324 N. Kingsley Dr.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	Company NAIC Number:	

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.

PARTIAL REAR VIEW (06/05/2015)



PARTIAL REAR VIEW (06/05/2015)



See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2324 N. Kingsley Dr.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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.

FRONT VIEW (06/05/2015)



EAST SIDE VIEW (06/05/2015)



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2324 N. Kingsley Dr.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	Company NAIC Number:	

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.

PARTIAL REAR VIEW (06/05/2015)



WEST SIDE VIEW (06/05/2015)



FILE: 90251610.09o 000034755

NGS OPUS SOLUTION REPORT CP CORONADO

All computed coordinate accuracies are listed as peak-to-peak values.
For additional information: http://www.ngs.noaa.gov/OPUS/about.html#accuracy

USER: gjeidson@cox.net DATE: December 18, 2009
RINEX FILE: 90251610.09o TIME: 21:51:18 UTC

SOFTWARE: page5 0909.08 master28.pl 081023 START: 2009/06/10 14:32:00
EPHEMERIS: igs15353.eph [precise] STOP: 2009/06/10 22:14:00
NAV FILE: brdc1610.09n OBS USED: 18910 / 19931 : 95%
ANT NAME: TRM41249.00 NONE # FIXED AMB: 97 / 113 : 86%
ARP HEIGHT: 1.3873 OVERALL RMS: 0.021(m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2009.4405)

X: -1219212.613(m) 0.003(m) -1219213.326(m) 0.003(m)
Y: -5231349.623(m) 0.014(m) -5231348.228(m) 0.014(m)
Z: 3429538.942(m) 0.016(m) 3429538.781(m) 0.016(m)

LAT: 32 43 53.55805 0.021(m) 32 43 53.57466 0.021(m)
E LON: 256 52 51.20523 0.006(m) 256 52 51.16641 0.006(m)
W LON: 103 7 8.79477 0.006(m) 103 7 8.83359 0.006(m)
EL HGT: 1086.325(m) 0.009(m) 1085.232(m) 0.009(m)
ORTHO HGT: 1107.925(m) 0.030(m) [NAVD88 (Computed using GEOID03)]

Table with 4 columns: Parameter, UTM COORDINATES (UTM Zone 13), STATE PLANE COORDINATES (SPC 3001 NM E), and values. Rows include Northing (Y), Easting (X), Convergence, Point Scale, and Combined Factor.

US NATIONAL GRID DESIGNATOR: 13SFS7624823091(NAD 83)

BASE STATIONS USED

Table with 5 columns: PID, DESIGNATION, LATITUDE, LONGITUDE, and DISTANCE (m). Rows include DG6517, DL2764, and DF5391.

NEAREST NGS PUBLISHED CONTROL POINT

Table with 5 columns: PID, DESIGNATION, LATITUDE, LONGITUDE, and DISTANCE (m). Row includes CV0849 HOBBS N MUNICIPAL TANK.

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

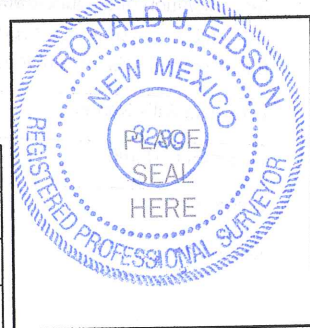
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Daniel Soto Jr.</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. <b>2401 N. Cielo Dr.</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 2, Block 3, First Unit, Norte Vista Addition, City of Hobbs, Lea County, New Mexico.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32 727182 N</b> Long. <b>103.139419 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft		a) Square footage of attached garage <b>324</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq ft		c) Total net area of flood openings in A9.b _____ sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>
B4. Map/Panel Number <b>35025C/1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP Coronado</b> Vertical Datum: <b>NAVD 1988</b>	
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <b>3633 . 2</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) <b>3632 . 6</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <b>3632 . 5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <b>3632 . 3</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <b>3632 . 4</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>	License Number <b>12641</b>		
Title <b>President</b>	Company Name <b>John West Surveying Company</b>		
Address <b>412 N. Dal Paso St.</b>	City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
Signature <i>Gary J. Eidson</i>	Date <b>02/18/2015</b>	Telephone <b>(575) 318-1157</b>	



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2401 N. Cielo Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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 Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the south side of the building.

Signature *Bary H. Edson* Date 02/18/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

Replaces all previous editions.

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2401 N. Cielo Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

Front View 02/18/15



Rear View 02/18/15





FILE: 90251610.09o 000034755

NGS OPUS SOLUTION REPORT CP CORONADO

All computed coordinate accuracies are listed as peak-to-peak values.
For additional information: http://www.ngs.noaa.gov/OPUS/about.html#accuracy

USER: gjeidson@cox.net DATE: December 18, 2009
RINEX FILE: 90251610.09o TIME: 21:51:18 UTC

SOFTWARE: page5 0909.08 master28.pl 081023 START: 2009/06/10 14:32:00
EPHEMERIS: igs15353.eph [precise] STOP: 2009/06/10 22:14:00
NAV FILE: brdc1610.09n OBS USED: 18910 / 19931 : 95%
ANT NAME: TRM41249.00 NONE # FIXED AMB: 97 / 113 : 86%
ARP HEIGHT: 1.3873 OVERALL RMS: 0.021 (m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2009.4405)

X: -1219212.613 (m) 0.003 (m) -1219213.326 (m) 0.003 (m)
Y: -5231349.623 (m) 0.014 (m) -5231348.228 (m) 0.014 (m)
Z: 3429538.942 (m) 0.016 (m) 3429538.781 (m) 0.016 (m)

LAT: 32 43 53.55805 0.021 (m) 32 43 53.57466 0.021 (m)
E LON: 256 52 51.20523 0.006 (m) 256 52 51.16641 0.006 (m)
W LON: 103 7 8.79477 0.006 (m) 103 7 8.83359 0.006 (m)
EL HGT: 1086.325 (m) 0.009 (m) 1085.232 (m) 0.009 (m)
ORTHO HGT: 1107.925 (m) 0.030 (m) [NAVD88 (Computed using GEOID03)]

Table with 3 columns: UTM COORDINATES, STATE PLANE COORDINATES, and values for Northing (Y), Easting (X), Convergence, Point Scale, and Combined Factor.

US NATIONAL GRID DESIGNATOR: 13SFS7624823091 (NAD 83)

BASE STATIONS USED

Table with 5 columns: PID, DESIGNATION, LATITUDE, LONGITUDE, and DISTANCE (m). Rows include DG6517, DL2764, and DF5391.

NEAREST NGS PUBLISHED CONTROL POINT

CV0849 HOBBS N MUNICIPAL TANK N324319.019 W1030824.555 2241.6

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <b>Mario Parra</b>		FOR INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>2706 N. Albertson</b>		Policy Number:
City <b>Hobbs</b>	State <b>NM</b>	Company NAIC Number:
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 13, Block 12A, Fifth Unit, Norte Vista Addition, City of Hobbs, Lea County, New Mexico.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32.731659 N</b> Long. <b>103.138414 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) _____ sq ft	b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____	a) Square footage of attached garage <b>440</b> sq ft
c) Total net area of flood openings in A8.b _____ sq ft	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
		c) Total net area of flood openings in A9.b _____ sq ft
		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C / 1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: **CP Coronado** Vertical Datum: **NAVD 1988**

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

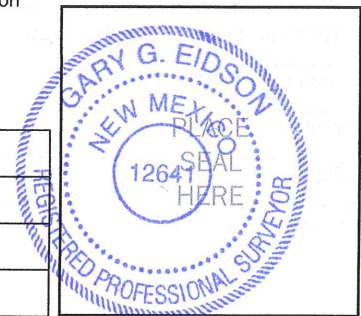
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>3625 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<b>3625 . 3</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>3625 . 0</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>3624 . 7</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>3624 . 9</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  
 Check here if attachments.

Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Co., Inc.</b>	
Address <b>412 N. Dal Paso</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary G. Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 318-1157</b>
		Date <b>09/29/2014</b>	



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>2706 N. Albertson</b>			Policy Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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 **Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the north side of the building.**

Signature <b>Paula L. Quinn</b>	Date
---------------------------------	------

**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, crawlspace, or enclosure) is 0 . 9  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is 1 . 1  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 0 . 4  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is 0 . 1  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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____

Comments \_\_\_\_\_

Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2706 N. Albertson			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

Front View 09/27/2014



Rear View 09/27/2014



FILE: 90251610.09o 000034755

NGS OPUS SOLUTION REPORT CP CORONADO

All computed coordinate accuracies are listed as peak-to-peak values. For additional information: <http://www.ngs.noaa.gov/OPUS/about.html#accuracy>

USER: gjeidson@cox.net DATE: December 18, 2009  
RINEX FILE: 90251610.09o TIME: 21:51:18 UTC

SOFTWARE: page5 0909.08 master28.pl 081023 START: 2009/06/10 14:32:00  
EPHEMERIS: igs15353.eph [precise] STOP: 2009/06/10 22:14:00  
NAV FILE: brdc1610.09n OBS USED: 18910 / 19931 : 95%  
ANT NAME: TRM41249.00 NONE # FIXED AMB: 97 / 113 : 86%  
ARP HEIGHT: 1.3873 OVERALL RMS: 0.021(m)

REF FRAME: NAD\_83(CORS96) (EPOCH:2002.0000) ITRF00 (EPOCH:2009.4405)

X: -1219212.613(m) 0.003(m) -1219213.326(m) 0.003(m)  
Y: -5231349.623(m) 0.014(m) -5231348.228(m) 0.014(m)  
Z: 3429538.942(m) 0.016(m) 3429538.781(m) 0.016(m)

LAT: 32 43 53.55805 0.021(m) 32 43 53.57466 0.021(m)  
E LON: 256 52 51.20523 0.006(m) 256 52 51.16641 0.006(m)  
W LON: 103 7 8.79477 0.006(m) 103 7 8.83359 0.006(m)  
EL HGT: 1086.325(m) 0.009(m) 1085.232(m) 0.009(m)  
ORTHO HGT: 1107.925(m) 0.030(m) [NAVD88 (Computed using GEOID03)]

	UTM COORDINATES	STATE PLANE COORDINATES
	UTM (Zone 13)	SPC (3001 NM E)
Northing (Y) [meters]	3623091.068	192636.037
Easting (X) [meters]	676248.362	278808.720
Convergence [degrees]	1.01726634	0.65660558
Point Scale	0.99998304	1.00006875
Combined Factor	0.99981252	0.99989821

US NATIONAL GRID DESIGNATOR: 13SFS7624823091(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DG6517	NMRO ROSWELL CORS ARP	N332341.834	W1043520.737	155771.0
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	121689.5
DF5391	TXLU LUBBOCK RRP2 CORS ARP	N333207.490	W1015034.162	148785.6

NEAREST NGS PUBLISHED CONTROL POINT

CV0849 HOBBS N MUNICIPAL TANK N324319.019 W1030824.555 2241.6

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

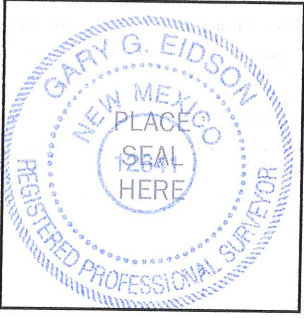
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Brandon Thompson</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>3028 N. Northwest Dr.</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 3, Replat of Block 11A, First Unit, North Acres Subdivision, City of Hobbs, Lea County, New Mexico.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32.733160 N</b> Long. <b>103.151427 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft		a) Square footage of attached garage <b>360</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq ft		c) Total net area of flood openings in A9.b _____ sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>
B4. Map/Panel Number <b>35025C / 1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP NIPPY</b> Vertical Datum: <b>NAVD 1988</b>	
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <b>3640 . 4</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only) _____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab) <b>3639 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <b>3639 . 7</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG) <b>3639 . 1</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG) <b>3639 . 6</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support _____	<input type="checkbox"/> feet <input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary Eidson</i>		Date <b>06/10/2015</b>	ZIP Code <b>88240</b>
		Telephone <b>(575) 318-1157</b>	



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3028 N. Northwest Dr.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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  Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the north side of the building.

Signature *Ray S. Eason* Date 06/10/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments \_\_\_\_\_

Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3028 N. Northwest Dr.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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.

06/09/2015 Front View



06/09/2015 Rear View





NGS OPUS SOLUTION REPORT CP NIPPY

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All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: May 23, 2013  
RINEX FILE: 7318099t.13o TIME: 19:57:00 UTC

SOFTWARE: page5 1209.04 master32.pl 082112 START: 2013/04/09 19:12:00  
EPHEMERIS: igs17352.eph [precise] STOP: 2013/04/09 22:11:00  
NAV FILE: brdc0990.13n OBS USED: 6992 / 7369 : 95%  
ANT NAME: TRMR8\_GNSS3 NONE # FIXED AMB: 45 / 50 : 90%  
ARP HEIGHT: 1.558 OVERALL RMS: 0.013(m)

REF FRAME: NAD\_83(2011)(EPOCH:2010.0000) IGS08 (EPOCH:2013.2709)

X: -1222821.726(m) 0.007(m) -1222822.502(m) 0.007(m)  
Y: -5229635.801(m) 0.011(m) -5229634.398(m) 0.011(m)  
Z: 3430869.862(m) 0.008(m) 3430869.708(m) 0.008(m)

LAT: 32 44 44.78584 0.001(m) 32 44 44.80252 0.001(m)  
E LON: 256 50 21.27312 0.006(m) 256 50 21.23183 0.006(m)  
W LON: 103 9 38.72688 0.006(m) 103 9 38.76817 0.006(m)  
EL HGT: 1092.393(m) 0.014(m) 1091.310(m) 0.014(m)  
ORTHO HGT: 1114.007(m) 0.028(m) [NAVD88 (Computed using GEOID12A)]

UTM COORDINATES STATE PLANE COORDINATES

UTM (Zone 13) SPC (3001 NM E)

Northing (Y) [meters] 3624600.336 194170.157  
Easting (X) [meters] 672317.796 274887.386  
Convergence [degrees] 0.99511442 0.63432441  
Point Scale 0.99996615 1.00005794  
Combined Factor 0.99979467 0.99988645

US NATIONAL GRID DESIGNATOR: 13SFS7231724600(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DM4704	TXSO STANTON CORS ARP	N320828.201	W1014827.359	143845.2
DM4161	TXKM KERMIT CORS ARP	N315033.357	W1030631.257	100289.4
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	125381.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0272 R 35 N324424. W1030939. 642.8

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE	
A1. Building Owner's Name <b>Rodney S. Smith, Jr.</b>	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>3319 N. Central Dr.</b>	Company NAIC Number:
City <b>Hobbs</b> State <b>NM</b> ZIP Code <b>88240</b>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 7, Block 15, Ninth Unit, Lincoln Park Addition, City of Hobbs, Lea County, New Mexico.</b>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>	
A5. Latitude/Longitude: Lat. <b>32.736938 N</b> Long. <b>103.150448 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>	
A8. For a building with a crawlspace or enclosure(s):	A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft	a) Square footage of attached garage <b>460</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq ft	c) Total net area of flood openings in A9.b _____ sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>			B2. County Name <b>Lea</b>		B3. State <b>NM</b>
B4. Map/Panel Number <b>35025C/1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: **CP Nippy** Vertical Datum: **NAVD 1988**

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

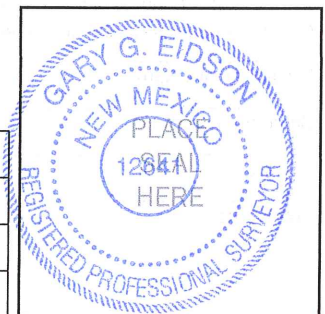
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>3640 . 3</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<b>3639 . 6</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>3640 . 3</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>3639 . 5</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>3639 . 8</b>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  
 Check here if attachments.

Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary S. Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 318-1157</b>
Date <b>01/27/2015</b>			



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>3319 N. Central Dr.</b>			Policy Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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 **Lowest elevation of machinery or equipment servicing the building are the appliances located inside the building.**

Signature *Daryll Edson* Date **01/27/2015**

**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, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3319 N. Central Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

Front View 1/27/2015



Rear View 1/27/2015



NGS OPUS SOLUTION REPORT CP NIPPY

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All computed coordinate accuracies are listed as peak-to-peak values.

For additional information: <http://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: May 23, 2013  
RINEX FILE: 7318099t.13o TIME: 19:57:00 UTC

SOFTWARE: page5 1209.04 master32.pl 082112 START: 2013/04/09 19:12:00  
EPHEMERIS: igs17352.eph [precise] STOP: 2013/04/09 22:11:00  
NAV FILE: brdc0990.13n OBS USED: 6992 / 7369 : 95%  
ANT NAME: TRMR8\_GNSS3 NONE # FIXED AMB: 45 / 50 : 90%  
ARP HEIGHT: 1.558 OVERALL RMS: 0.013(m)

REF FRAME: NAD\_83(2011)(EPOCH:2010.0000) IGS08 (EPOCH:2013.2709)

X: -1222821.726(m) 0.007(m) -1222822.502(m) 0.007(m)  
Y: -5229635.801(m) 0.011(m) -5229634.398(m) 0.011(m)  
Z: 3430869.862(m) 0.008(m) 3430869.708(m) 0.008(m)

LAT: 32 44 44.78584 0.001(m) 32 44 44.80252 0.001(m)  
E LON: 256 50 21.27312 0.006(m) 256 50 21.23183 0.006(m)  
W LON: 103 9 38.72688 0.006(m) 103 9 38.76817 0.006(m)  
EL HGT: 1092.393(m) 0.014(m) 1091.310(m) 0.014(m)  
ORTHO HGT: 1114.007(m) 0.028(m) [NAVD88 (Computed using GEOID12A)]

UTM COORDINATES STATE PLANE COORDINATES

UTM (Zone 13) SPC (3001 NM E)

Northing (Y) [meters] 3624600.336 194170.157  
Easting (X) [meters] 672317.796 274887.386  
Convergence [degrees] 0.99511442 0.63432441  
Point Scale 0.99996615 1.00005794  
Combined Factor 0.99979467 0.99988645

US NATIONAL GRID DESIGNATOR: 13SFS7231724600(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DM4704	TXSO STANTON CORS ARP	N320828.201	W1014827.359	143845.2
DM4161	TXKM KERMIT CORS ARP	N315033.357	W1030631.257	100289.4
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	125381.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0272 R 35 N324424. W1030939. 642.8

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name **Maribel Gonzalez**

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
**3503 Central Ave**

Company NAIC Number:

City **Hobbs**

State **NM**

ZIP Code **88240**

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
**A portion of Lot 1, Block 23, Fifteenth Unit, Lincoln Park Addition, City of Hobbs, New Mexico**

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **Residential**

A5. Latitude/Longitude: Lat. **32 737958 N** Long. **103.150446 W** Horizontal Datum:  NAD 1927  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 **1B**

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) **N/A** sq ft
- b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade \_\_\_\_\_
- c) Total net area of flood openings in A8.b \_\_\_\_\_ sq ft
- d) Engineered flood openings?  Yes  No

A9. For a building with an attached garage:

- a) Square footage of attached garage **N/A** sq ft
- b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade \_\_\_\_\_
- c) Total net area of flood openings in A9.b \_\_\_\_\_ sq ft
- d) Engineered flood openings?  Yes  No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
**City of Hobbs 350029**

B2. County Name  
**Lea**

B3. State  
**NM**

B4. Map/Panel Number  
**35025C/1335**

B5. Suffix  
**D**

B6. FIRM Index Date  
**12/16/2008**

B7. FIRM Panel Effective/  
 Revised Date  
**12/16/2008**

B8. Flood Zone(s)  
**AO**

B9. Base Flood Elevation(s) (Zone  
 AO, use base flood depth)  
**1'**

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: \_\_\_\_\_

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 Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  CBRS  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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: **CP NIPPY** Vertical Datum: **NAVD 1988**

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) **3640 . 6**  feet  meters
- b) Top of the next higher floor \_\_\_\_\_  feet  meters
- c) Bottom of the lowest horizontal structural member (V Zones only) \_\_\_\_\_  feet  meters
- d) Attached garage (top of slab) \_\_\_\_\_  feet  meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) **3640 . 6**  feet  meters
- f) Lowest adjacent (finished) grade next to building (LAG) **3640 . 5**  feet  meters
- g) Highest adjacent (finished) grade next to building (HAG) **3640 . 5**  feet  meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support \_\_\_\_\_  feet  meters

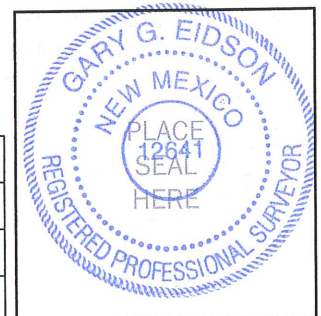
## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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.  
 Check here if attachments.

Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No

Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
		ZIP Code <b>88240</b>	
Signature <i>Gary Eidson</i>		Date <b>01/05/2015</b>	Telephone <b>(575) 318-1157</b>



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>3503 Central Ave</b>			Policy Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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 **Lowest elevation of machinery or equipment servicing the building are the appliances located inside of the building.**

Signature *Ray S. Edson* Date **01/05/2015**

**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, crawlspace, or enclosure) is 0 . 1  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is 0 . 1  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 0 . 1  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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments \_\_\_\_\_

Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3503 Central Ave			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

Front View 12/30/2014



Rear View 12/30/2014





NGS OPUS SOLUTION REPORT CP NIPPY

=====

All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: May 23, 2013  
RINEX FILE: 7318099t.13o TIME: 19:57:00 UTC

SOFTWARE: page5 1209.04 master32.pl 082112 START: 2013/04/09 19:12:00  
EPHEMERIS: igs17352.eph [precise] STOP: 2013/04/09 22:11:00  
NAV FILE: brdc0990.13n OBS USED: 6992 / 7369 : 95%  
ANT NAME: TRMR8\_GNSS3 NONE # FIXED AMB: 45 / 50 : 90%  
ARP HEIGHT: 1.558 OVERALL RMS: 0.013(m)

REF FRAME: NAD\_83(2011)(EPOCH:2010.0000) IGS08 (EPOCH:2013.2709)

X: -1222821.726(m) 0.007(m) -1222822.502(m) 0.007(m)  
Y: -5229635.801(m) 0.011(m) -5229634.398(m) 0.011(m)  
Z: 3430869.862(m) 0.008(m) 3430869.708(m) 0.008(m)

LAT: 32 44 44.78584 0.001(m) 32 44 44.80252 0.001(m)  
E LON: 256 50 21.27312 0.006(m) 256 50 21.23183 0.006(m)  
W LON: 103 9 38.72688 0.006(m) 103 9 38.76817 0.006(m)  
EL HGT: 1092.393(m) 0.014(m) 1091.310(m) 0.014(m)  
ORTHO HGT: 1114.007(m) 0.028(m) [NAVD88 (Computed using GEOID12A)]

UTM COORDINATES STATE PLANE COORDINATES

UTM (Zone 13) SPC (3001 NM E)

Northing (Y) [meters] 3624600.336 194170.157  
Easting (X) [meters] 672317.796 274887.386  
Convergence [degrees] 0.99511442 0.63432441  
Point Scale 0.99996615 1.00005794  
Combined Factor 0.99979467 0.99988645

US NATIONAL GRID DESIGNATOR: 13SFS7231724600(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DM4704	TXSO STANTON CORS ARP	N320828.201	W1014827.359	143845.2
DM4161	TXKM KERMIT CORS ARP	N315033.357	W1030631.257	100289.4
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	125381.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0272 R 35 N324424. W1030939. 642.8

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

**IMPORTANT:** Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <b>Scott Mitchell LaFave II</b>		FOR INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>3509 N. Northwest Dr.</b>		Policy Number:
City <b>Hobbs</b>	State <b>NM</b>	Company NAIC Number:
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 10, Block 26, Sixteenth Unit, Lincoln Park Addition, City of Hobbs, Lea County, New Mexico.</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32 737920 N</b> Long. <b>103.156516 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft		a) Square footage of attached garage <b>380</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq ft		c) Total net area of flood openings in A9.b _____ sq ft
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C/1335</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: **CP NIPPY** Vertical Datum: **NAVD 1988**

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

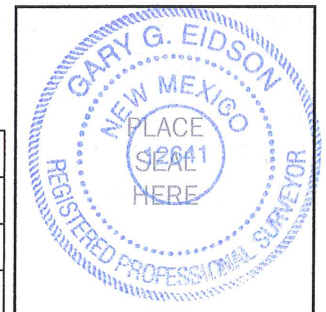
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>3642 . 9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>3642 . 3</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>3642 . 8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3642 . 3</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>3642 . 7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  
 Check here if attachments.

Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary G. Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 318-1157</b>
Date <b>03/09/2015</b>			



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3509 N. Northwest Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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 Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the north side of the building.

Signature *Nancy K. Edwards* Date 03/07/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____

Comments \_\_\_\_\_

Check here if attachments.

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or R.O. Route and Box No. 3509 N. Northwest Dr.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

3/7/15 Front View



3/7/15 Rear View



NGS OPUS SOLUTION REPORT CP NIPPY

=====

All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: May 23, 2013  
RINEX FILE: 7318099t.13o TIME: 19:57:00 UTC

SOFTWARE: page5 1209.04 master32.pl 082112 START: 2013/04/09 19:12:00  
EPHEMERIS: igs17352.eph [precise] STOP: 2013/04/09 22:11:00  
NAV FILE: brdc0990.13n OBS USED: 6992 / 7369 : 95%  
ANT NAME: TRMR8\_GNSS3 NONE # FIXED AMB: 45 / 50 : 90%  
ARP HEIGHT: 1.558 OVERALL RMS: 0.013(m)

REF FRAME: NAD\_83(2011)(EPOCH:2010.0000) IGS08 (EPOCH:2013.2709)

X: -1222821.726(m) 0.007(m) -1222822.502(m) 0.007(m)  
Y: -5229635.801(m) 0.011(m) -5229634.398(m) 0.011(m)  
Z: 3430869.862(m) 0.008(m) 3430869.708(m) 0.008(m)

LAT: 32 44 44.78584 0.001(m) 32 44 44.80252 0.001(m)  
E LON: 256 50 21.27312 0.006(m) 256 50 21.23183 0.006(m)  
W LON: 103 9 38.72688 0.006(m) 103 9 38.76817 0.006(m)  
EL HGT: 1092.393(m) 0.014(m) 1091.310(m) 0.014(m)  
ORTHO HGT: 1114.007(m) 0.028(m) [NAVD88 (Computed using GEOID12A)]

UTM COORDINATES STATE PLANE COORDINATES

UTM (Zone 13) SPC (3001 NM E)

Northing (Y) [meters] 3624600.336 194170.157  
Easting (X) [meters] 672317.796 274887.386  
Convergence [degrees] 0.99511442 0.63432441  
Point Scale 0.99996615 1.00005794  
Combined Factor 0.99979467 0.99988645

US NATIONAL GRID DESIGNATOR: 13SFS7231724600(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DM4704	TXSO STANTON CORS ARP	N320828.201	W1014827.359	143845.2
DM4161	TXKM KERMIT CORS ARP	N315033.357	W1030631.257	100289.4
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	125381.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0272 R 35 N324424. W1030939. 642.8

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

**Important: Read the instructions on pages 1-9.**

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name: Kidney Care Center, LLC		FOR INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3921 N. Calle Grande		Policy Number:
City: Hobbs State: N.M. ZIP Code: 88240		Company NAIC Number:
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Parcel #4940115113407		

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Commercial

A5. Latitude/Longitude: Lat. N32°44'34.80" Lon g. W103°09'28.16" Horizontal Datum:  NAD 1927  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 1B

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s)	<u>N/A</u>	sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	<u>N/A</u>	
c) Total net area of flood openings in A8.b	<u>N/A</u>	sq in
d) Engineered flood openings?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

A9. For a building with an attached garage:

a) Square footage of attached garage	<u>N/A</u>	sq ft
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	<u>N/A</u>	sq in
d) Engineered flood openings?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number City of Hobbs 350029		B2. County Name Lea		B3. State N.M.	
B4. Map/Panel Number 35025C1335	B5. Suffix D	B6. FIRM Index Date 12/16/08	B7. FIRM Panel Effective/Revised Date 12/16/08	B8. Flood Zone(s) AO	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) (1')

B10. Indicate the source of the Base Flood Elevation (BFE) data base or base flood depth entered in Item B9.  
 FIS Profile  FIRM  Community Determined  Other/Source: \_\_\_\_\_

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 Date: \_\_\_\_\_  CBRS  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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.  
 Benchmark Utilized: City of Hobbs Base Station Vertical Datum: NAVD 88  
 Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>3646.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>3646.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3643.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>3643.3</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No

Check here if attachments.

Certifier's Name: William M. Hicks, III	License Number: 12348
Title: Principal Surveyor	Company Name: Pettigrew & Associates, P.A. Project No. 2014.1405
Address: 100 E. Navajo-Suite 100	City: Hobbs State: NM ZIP Code: 88240
Signature: <i>William M. Hicks</i>	Date: 11-9-15 Telephone: 575-393-9827



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3921 N. Calle Grande	Policy Number:
City: City of Hobbs State: N.M. ZIP Code: 88240	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.

HAG and LAG were taken from pre-constructions conditions. The lowest machinery serving the building are appliances inside the structure sitting on floor level.

Signature *W. M. Hicks* Date 11-9-15

**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, crawlspace, or enclosure) is 2.8  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is 2.9  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 0.0  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: William M. Hicks, III

Address: 100 E. Navajo-Suite 100 City: Hobbs State: NM ZIP Code: 88240

Signature: *W. M. Hicks* Date: 11-9-15 Telephone: 575-393-3827

Comments: See comments in Section "D".

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–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 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–G10) 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 Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_
- G10. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date
Comments	

Check here if attachments.

# Building Photographs

See Instructions for Item A6.

**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.

3921 N. Calle Grande

Project No. 2014.1405

City: Hobbs

State: N.M. ZIP Code: 88240

Policy Number:

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.



North Side of Property - Looking South  
Photo Taken 11/4/2015



# Building Photographs

Continuation Page

**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. 3921 N. Calle Grande Project No. 2014.1405	FOR INSURANCE COMPANY USE
City: Hobbs State: N.M ZIP Code: 88240	Policy Number:
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.	



West Side of Property - Looking East  
Photo Taken 11/4/2015

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

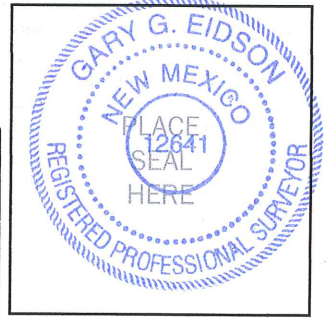
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>Carlos A. Fuentes</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>4905 Breanna St.</b>		Company NAIC Number:
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Lot 2A, Second Amended Windsor Estates Subdivision, City of Hobbs, Lea County, NM</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>		
A5. Latitude/Longitude: Lat. <b>32 755213 N</b> Long. <b>103.154075 W</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 <b>1B</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft	a) Square footage of attached garage <b>475</b> sq ft	
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____	
c) Total net area of flood openings in A8.b _____ sq ft	c) Total net area of flood openings in A9.b _____ sq ft	
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>City of Hobbs 350029</b>		B2. County Name <b>Lea</b>		B3. State <b>NM</b>	
B4. Map/Panel Number <b>35025C/1170</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>12/16/2008</b>	B7. FIRM Panel Effective/Revised Date <b>12/16/2008</b>	B8. Flood Zone(s) <b>AO</b>	B9. Base Flood Elevation(s) (Zone A0, use base flood depth) <b>1'</b>
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 checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: <b>CP NIPPY</b> Vertical Datum: <b>NAVD 1988</b>			
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____ Datum used for building elevations must be the same as that used for the BFE.			
		Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<b>3649 . 5</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	_____	<input type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	<b>3649 . 1</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>3649 . 4</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>3647 . 6</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>3648 . 4</b>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters

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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Co., Inc</b>	
Address <b>412 N. Dal Paso</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature <i>Gary Eidson</i>		ZIP Code <b>88240</b>	Telephone <b>(575) 318-1157</b>
		Date <b>01/27/2015</b>	



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4905 Breanna St.			Policy Number:	
City Hobbs	State NM	ZIP Code 88240	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: Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the north side of the building. Natural grade elevations were used for the HAG and LAG.

Signature: *Ray B. Quinn* Date: 01/27/2015

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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 Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments \_\_\_\_\_

Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4905 Breanna St.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

01/10/15 Front View



01/10/15 SW Rear View



NGS OPUS SOLUTION REPORT CP NIPPY

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All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: May 23, 2013  
RINEX FILE: 7318099t.13o TIME: 19:57:00 UTC

SOFTWARE: page5 1209.04 master32.pl 082112 START: 2013/04/09 19:12:00  
EPHEMERIS: igs17352.eph [precise] STOP: 2013/04/09 22:11:00  
NAV FILE: brdc0990.13n OBS USED: 6992 / 7369 : 95%  
ANT NAME: TRMR8\_GNSS3 NONE # FIXED AMB: 45 / 50 : 90%  
ARP HEIGHT: 1.558 OVERALL RMS: 0.013(m)

REF FRAME: NAD\_83(2011)(EPOCH:2010.0000) IGS08 (EPOCH:2013.2709)

X: -1222821.726(m) 0.007(m) -1222822.502(m) 0.007(m)  
Y: -5229635.801(m) 0.011(m) -5229634.398(m) 0.011(m)  
Z: 3430869.862(m) 0.008(m) 3430869.708(m) 0.008(m)

LAT: 32 44 44.78584 0.001(m) 32 44 44.80252 0.001(m)  
E LON: 256 50 21.27312 0.006(m) 256 50 21.23183 0.006(m)  
W LON: 103 9 38.72688 0.006(m) 103 9 38.76817 0.006(m)  
EL HGT: 1092.393(m) 0.014(m) 1091.310(m) 0.014(m)  
ORTHO HGT: 1114.007(m) 0.028(m) [NAVD88 (Computed using GEOID12A)]

UTM COORDINATES STATE PLANE COORDINATES

UTM (Zone 13) SPC (3001 NM E)

Northing (Y) [meters] 3624600.336 194170.157  
Easting (X) [meters] 672317.796 274887.386  
Convergence [degrees] 0.99511442 0.63432441  
Point Scale 0.99996615 1.00005794  
Combined Factor 0.99979467 0.99988645

US NATIONAL GRID DESIGNATOR: 13SFS7231724600(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DM4704	TXSO STANTON CORS ARP	N320828.201	W1014827.359	143845.2
DM4161	TXXM KERMIT CORS ARP	N315033.357	W1030631.257	100289.4
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	125381.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0272 R 35 N324424. W1030939. 642.8

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name **John Barrientes**

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
**4909 N. Breanna St.**

Company NAIC Number:

City **Hobbs**

State **NM**

ZIP Code **88240**

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
**Lot 3, Second Amended Windsor Estates Subdivision, City of Hobbs, Lea County, New Mexico.**

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **Residential**

A5. Latitude/Longitude: Lat. **32 755403 N** Long. **103.154135 W** Horizontal Datum:  NAD 1927  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 **1B**

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) **N/A** sq ft
- b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade **0**
- c) Total net area of flood openings in A8.b **0** sq ft
- d) Engineered flood openings?  Yes  No

A9. For a building with an attached garage:

- a) Square footage of attached garage **452** sq ft
- b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade **0**
- c) Total net area of flood openings in A9.b **0** sq ft
- d) Engineered flood openings?  Yes  No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
**City of Hobbs 350029**

B2. County Name  
**Lea**

B3. State  
**NM**

B4. Map/Panel Number  
**35025C/1170**

B5. Suffix  
**D**

B6. FIRM Index Date  
**12/16/2008**

B7. FIRM Panel Effective/Revised Date  
**12/16/2008**

B8. Flood Zone(s)  
**AO**

B9. Base Flood Elevation(s) (Zone AO, use base flood depth)  
**1'**

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: \_\_\_\_\_

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 Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  CBRS  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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: **CP Nippy** Vertical Datum: **NAVD 1988**

Indicate elevation datum used for the elevations in items a) through h) below.  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_  
 Datum used for building elevations must be the same as that used for the BFE.

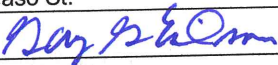
Check the measurement used.

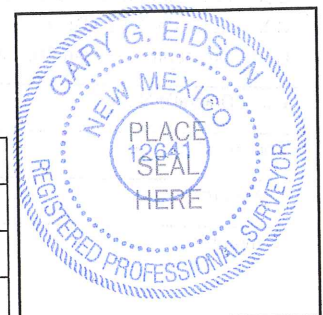
- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) **3650 . 0**  feet  meters
- b) Top of the next higher floor \_\_\_\_\_  feet  meters
- c) Bottom of the lowest horizontal structural member (V Zones only) \_\_\_\_\_  feet  meters
- d) Attached garage (top of slab) **3649 . 6**  feet  meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) **3649 . 3**  feet  meters
- f) Lowest adjacent (finished) grade next to building (LAG) **3647 . 8**  feet  meters
- g) Highest adjacent (finished) grade next to building (HAG) **3648 . 2**  feet  meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support \_\_\_\_\_  feet  meters

## 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. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No
- Check here if attachments.

Certifier's Name <b>Gary Eidson</b>		License Number <b>12641</b>	
Title <b>President</b>		Company Name <b>John West Surveying Company</b>	
Address <b>412 N. Dal Paso St.</b>		City <b>Hobbs</b>	State <b>NM</b>
Signature 		Date <b>08/18/2015</b>	ZIP Code <b>88240</b>
		Telephone <b>(575) 318-1157</b>	



**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. <b>4909 N. Breanna St.</b>			Policy Number:	
City <b>Hobbs</b>	State <b>NM</b>	ZIP Code <b>88240</b>	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 **Lowest elevation of machinery or equipment servicing the building is the A/C unit located on the south side of the building.**

Signature *Ray E. [Signature]* Date **08/18/2015**

**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, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_     feet     meters     above or     below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ . \_\_\_\_\_     feet     meters     above or     below the HAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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 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. 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 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    Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ . \_\_\_\_\_     feet     meters    Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_ . \_\_\_\_\_     feet     meters    Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____

Comments \_\_\_\_\_

Check here if attachments.

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4909 N. Breanna St.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	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.

Front View 08/16/2015



Rear View #1 08/16/2015





<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4909 N. Breanna St.			Policy Number:
City Hobbs	State NM	ZIP Code 88240	Company NAIC Number:

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.

Rear View #2 08/16/2015



Rear View #3 08/16/2015



NGS OPUS SOLUTION REPORT CP NIPPY

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All computed coordinate accuracies are listed as peak-to-peak values.  
For additional information: <http://www.ngs.noaa.gov/OPUS/about.jsp#accuracy>

USER: [gjeidson@cox.net](mailto:gjeidson@cox.net) DATE: May 23, 2013  
RINEX FILE: 7318099t.13o TIME: 19:57:00 UTC

SOFTWARE: page5 1209.04 master32.pl 082112 START: 2013/04/09 19:12:00  
EPHEMERIS: igs17352.eph [precise] STOP: 2013/04/09 22:11:00  
NAV FILE: brdc0990.13n OBS USED: 6992 / 7369 : 95%  
ANT NAME: TRMR8\_GNSS3 NONE # FIXED AMB: 45 / 50 : 90%  
ARP HEIGHT: 1.558 OVERALL RMS: 0.013(m)

REF FRAME: NAD\_83(2011)(EPOCH:2010.0000) IGS08 (EPOCH:2013.2709)

X: -1222821.726(m) 0.007(m) -1222822.502(m) 0.007(m)  
Y: -5229635.801(m) 0.011(m) -5229634.398(m) 0.011(m)  
Z: 3430869.862(m) 0.008(m) 3430869.708(m) 0.008(m)

LAT: 32 44 44.78584 0.001(m) 32 44 44.80252 0.001(m)  
E LON: 256 50 21.27312 0.006(m) 256 50 21.23183 0.006(m)  
W LON: 103 9 38.72688 0.006(m) 103 9 38.76817 0.006(m)  
EL HGT: 1092.393(m) 0.014(m) 1091.310(m) 0.014(m)  
ORTHO HGT: 1114.007(m) 0.028(m) [NAVD88 (Computed using GEOID12A)]

UTM COORDINATES STATE PLANE COORDINATES

UTM (Zone 13) SPC (3001 NM E)

Northing (Y) [meters] 3624600.336 194170.157  
Easting (X) [meters] 672317.796 274887.386  
Convergence [degrees] 0.99511442 0.63432441  
Point Scale 0.99996615 1.00005794  
Combined Factor 0.99979467 0.99988645

US NATIONAL GRID DESIGNATOR: 13SFS7231724600(NAD 83)

BASE STATIONS USED

PID	DESIGNATION	LATITUDE	LONGITUDE	DISTANCE(m)
DM4704	TXSO STANTON CORS ARP	N320828.201	W1014827.359	143845.2
DM4161	TXKM KERMIT CORS ARP	N315033.357	W1030631.257	100289.4
DL2764	TXOE ODESSA CORS ARP	N315224.503	W1021850.232	125381.9

NEAREST NGS PUBLISHED CONTROL POINT

CV0272 R 35 N324424. W1030939. 642.8

This position and the above vector components were computed without any knowledge by the National Geodetic Survey regarding the equipment or field operating procedures used.