

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>GIRTY'S RENTALS, LLC</u>		For Insurance Company Use:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>214 FRONT ST.</u>		Policy Number	
City <u>ST. MARYS</u>		Company NAIC Number	
State <u>OH</u>		ZIP Code <u>45885</u>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>PAR# K32-046-014-00, REF#-DL22, BEING PART OF OL 22 &amp; 23, SECTION 3, ST. MARYS TOWNSHIP, AUGLAIZE CO, OH 10</u>			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)			
A5. Latitude/Longitude: Lat. _____ Long. _____		Horizontal Datum: <input checked="" type="checkbox"/> NAD 1927 <input 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>2</u>			
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:	
a) Square footage of crawl space or enclosure(s) <u>0</u> sq ft		a) Square footage of attached garage <u>NONE</u> sq ft	
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>0</u> sq in		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>0</u> sq in	
c) Total net area of flood openings in A8.b <u>0</u> sq in		c) Total net area of flood openings in A9.b <u>0</u> sq in	

390022

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

B1. NFIP Community Name & Community Number <u>CITY OF ST. MARYS, INCORPORATED AREA</u>		B2. County Name <u>AUGLAIZE</u>		B3. State <u>OH</u>	
B4. Map/Panel Number <u>39011C0080</u>	B5. Suffix <u>C</u>	B6. FIRM Index Date <u>SEPT. 6, 1989</u>	B7. FIRM Panel Effective/Revised Date <u>SEPT. 6, 1989</u>	B8. Flood Zone(s) <u>A</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>858.90 ft.</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 type="checkbox"/> FIRM <input checked="" type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
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-g below according to the building diagram specified in Item A7.

Benchmark Utilized BM-268, BM-355 BM-356 Vertical Datum NGVD 1929

Conversion/Comments SEE ATTACHED SHEET FOR DETAILS

Check the measurement used.

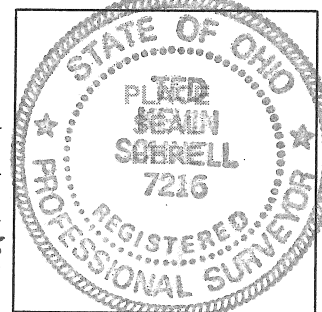
a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>872</u> <u>49</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>879</u> <u>56</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>---</u> <u>---</u> <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>---</u> <u>---</u> <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<u>---</u> <u>---</u> <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>872</u> <u>49</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>877</u> <u>75</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

☒ Check here if comments are provided on back of form.

Certifier's Name <u>TED K. SCHNELL</u>	License Number <u>OHIO 7216</u>
Title <u>OWNER</u>	Company Name <u>HFS CIVIL ENGINEERS AND LAND SURVEYORS</u>
Address <u>913 FIELDSTONE CT.</u>	City <u>WAPAKONETA</u>
State <u>OH</u>	ZIP Code <u>45895</u>
Signature <u>TED K. SCHNELL</u>	Date <u>3/31/08</u>
Telephone <u>419-738-4758</u>	



<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. 214 FRONT ST.		Policy Number
City ST. MARYS	State OH	ZIP Code 45885
		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 FOR THIS ELEVATION CERTIFICATE, I WOULD LIKE TO CERTIFY THE HOUSE OUT OF THE FLOOD ZONE. THE LOWEST ADJACENT GRADE IS HIGHER THAN THE BFE. HOWEVER, THE ENTIRE LOT CANNOT BE CERTIFIED OUT.

Signature Ted K. Schell Date 3/31/08 ☒ SEE LETTER  
Check here if attachments

### SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

\*NOT NEEDED\*

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

\*NOT NEEDED\*

### 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

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. and G9.

- 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 (PR) Datum \_\_\_\_\_

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

Local Official's Name CRAIG MOELLER Title

Community Name CITY OF ST. MARYS Telephone

Signature Date 3/31/08

Comments SEE ATTACHED LETTER FROM CITY OF ST. MARYS

☒ Check here if attachments

U.S. DEPARTMENT OF HOMELAND SECURITY - FEDERAL EMERGENCY MANAGEMENT AGENCY  
PROPERTY INFORMATION FORM

O.M.B. NO. 1660-0015  
Expires August 31, 2007

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 1.63 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing, reviewing, and submitting the form. You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, U.S. Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington DC 20472, Paperwork Reduction Project (1660-0015). Submission of the form is required to obtain or retain benefits under the National Flood Insurance Program. Please do not send your completed survey to the above address.

This form may be completed by the property owner, property owner's agent, licensed land surveyor, or registered professional engineer to support a request for a Letter of Map Amendment (LOMA), Conditional Letter of Map Amendment (CLOMA), Letter of Map Revision Based on Fill (LOMR-F), or Conditional Letter of Map Revision Based on Fill (CLOMR-F) for existing or proposed, single or multiple lots/structures. Please check the item below that describes your request:

<input checked="" type="checkbox"/> LOMA	A letter from DHS-FEMA stating that an existing structure or parcel of land that has not been elevated by fill (natural grade) would not be inundated by the base flood.
<input type="checkbox"/> CLOMA	A letter from DHS-FEMA stating that a proposed structure that is not to be elevated by fill (natural grade) would not be inundated by the base flood if built as proposed.
<input type="checkbox"/> LOMR-F	A letter from DHS-FEMA stating that an existing structure or parcel of land that has been elevated by fill would not be inundated by the base flood.
<input type="checkbox"/> CLOMR-F	A letter from DHS-FEMA stating that a parcel of land or proposed structure that will be elevated by fill would not be inundated by the base flood if fill is placed on the parcel as proposed or the structure is built as proposed.

Fill is defined as material from any source placed to raise the ground to or above the Base Flood Elevation (BFE). The common construction practice of removing unsuitable existing material (topsoil) and backfilling with select structural material is not considered the placement of fill if the practice does not alter the existing (natural grade) elevation, which is at or above the BFE. Fill that is placed before the date of the first National Flood Insurance Program (NFIP) map showing the area in a Special Flood Hazard Area (SFHA) is considered natural grade.

Has fill been placed on your property? ☐ Yes ☒ No If yes, when was fill placed? / month/year

Will fill be placed on your property? ☐ Yes ☒ No If yes, when will fill be placed? / month/year

1. Street Address of the Property (if request is for multiple structures, please attach additional sheet):

214 FRONT STREET, ST. MARYS OH 45885

2. Legal description of Property (Lot, Block, Subdivision) (if a street address cannot be provided):

PARCEL I.D.# K32-046-014-00, PART OF OUTLOT 22 & 23, CITY OF ST. MARYS

3. Are you requesting that the SFHA designation be removed from (check one): ST. MARYS TOWNSHIP, AUGLAIZE COUNTY, OH

- ☐ the entire legally recorded property?
- ☐ a portion of land within the bounds of the property (a certified metes and bounds description and map of the area to be removed, certified by a licensed land surveyor or registered professional engineer, are required)?
- ☒ structures on the property? What are the dates of construction?

4. Is this request for a (check one):

- ☐ single structure
- ☐ single lot
- ☒ multiple structures (How many structures are involved in your request? List the number: 2 ) HOUSE & GARAGE
- ☐ multiple lots (How many lots are involved in your request? List the number: )

In addition to this form (MT-1 Form 1), ALL requests must include the following:

- Copy of the Plat Map for the property (with recordation data and stamp of the Recorder's Office)  
OR
- Copy of the property Deed (with recordation data and stamp of the Recorder's Office), accompanied by a tax assessor's map or other certified map showing the surveyed location of the property relative to local streets and watercourses
- Copy of the effective FIRM panel and/or Flood Boundary and Floodway Map (FBFM) (if applicable) on which the property location has been accurately plotted (property inadvertently located in the NFIP regulatory floodway will require Section B of MT-1 Form 3)
- Form 2 - Elevation Form. If an Elevation Certificate has already been completed for this property, it may be submitted in addition to Form 2.

Please include a map scale and North arrow on all maps submitted.

For LOMR-Fs and CLOMR-Fs, the following must be submitted in addition to the items listed above:

- Form 3 - Community Acknowledgment Form

Processing Fee (see instructions for appropriate mailing address; or, visit [http://www.fema.gov/fhm/fhm\\_fees.shtm](http://www.fema.gov/fhm/fhm_fees.shtm) for the most current fee schedule)

**- NONE -**

Revised fee schedules are published periodically, but no more than once annually, as noted in the Federal Register. Please note: single/multiple lot(s)/structure(s) LOMAs are fee exempt. The current review and processing fees are listed below:

Check the fee that applies to your request:

- ☐ \$325 (single lot/structure LOMR-F following a CLOMR-F)
- ☐ \$425 (single lot/structure LOMR-F)
- ☐ \$500 (single lot/structure CLOMA or CLOMR-F)
- ☐ \$700 (multiple lot/structure LOMR-F following a CLOMR-F, or multiple lot/structure CLOMA)
- ☐ \$800 (multiple lot/structure LOMR-F or CLOMR-F)

Please submit the Payment Information Form for remittance of applicable fees. Please make your check or money order payable to: National Flood Insurance Program.

All documents submitted in support of this request are correct to the best of my knowledge. I understand that any false statement may be punishable by fine or imprisonment under Title 18 of the United States Code, Section 1001.

Applicant's Name: Ginty's Rental LLC  
Please Print or Type

Company: BRADLEY W BARTLETT

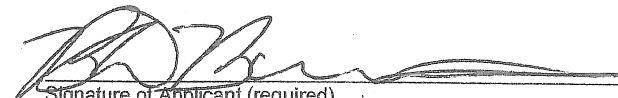
Mailing Address: PO Box 291  
ST MANUS OH 45885

Daytime Telephone No.: 419-305-1688

E-Mail Address:  
(optional)

Fax No.: 419-394-8128

Date 2-19-08

  
Signature of Applicant (required)  
BW BARTLETT

If you have any questions concerning DHS-FEMA policy, or the NFIP in general, please contact the FEMA Map Assistance Center toll free at 1-877-FEMA MAP (1-877-336-2627), or visit the Flood Hazard Mapping website at <http://www.fema.gov/fhm/>.