

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1–9.

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

SECTION A – PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name Burke Ronald L/Bonnie Tr				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 26630 N. 162nd St				Company NAIC Number:	
City Scottsdale		State Arizona		ZIP Code 85262	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) APN# 219-37-646					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. 33 43'40.6374"W Long. -111 43'51.2023"W			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>8</u>					
A8. For a building with a crawlspace or enclosure(s): <ul style="list-style-type: none"> a) Square footage of crawlspace or enclosure(s) <u>1500.00</u> sq ft b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u> c) Total net area of flood openings in A8.b <u>0.00</u> sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 					
A9. For a building with an attached garage: <ul style="list-style-type: none"> a) Square footage of attached garage <u>660.00</u> sq ft 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 A9.b <u>0.00</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 Maricopa County & 040037			B2. County Name Maricopa		B3. State Arizona
B4. Map/Panel Number 04013C1351	B5. Suffix M	B6. FIRM Index Date 11-04-2015	B7. FIRM Panel Effective/Revised Date 11-04-2015	B8. Flood Zone(s) AE & X	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 2052.00
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input checked="" type="checkbox"/> FIS Profile <input 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					

EL E V A T I O N C E R T I F I C A T E

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

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. 26630 N. 162nd St			Policy Number:
City Scottsdale	State Arizona	ZIP Code 85262	Company NAIC Number

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: See comments 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)	2052.0	<input checked="" type="checkbox"/>	feet	<input type="checkbox"/>	meters
b) Top of the next higher floor	2057.8	<input checked="" type="checkbox"/>	feet	<input type="checkbox"/>	meters
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	<input type="checkbox"/>	feet	<input type="checkbox"/>	meters
d) Attached garage (top of slab)	2055.1	<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)	N/A	<input type="checkbox"/>	feet	<input type="checkbox"/>	meters
f) Lowest adjacent (finished) grade next to building (LAG)	2052.4	<input checked="" type="checkbox"/>	feet	<input type="checkbox"/>	meters
g) Highest adjacent (finished) grade next to building (HAG)	2054.4	<input checked="" type="checkbox"/>	feet	<input type="checkbox"/>	meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	N/A	<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.*

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

Certifier's Name
Lance Dickson

License Number
46643

Title
President

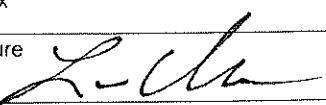
Company Name
Arizona Surveying and Mapping

Address
2440 W. Mission Lane, Suite 4

City
Phoenix

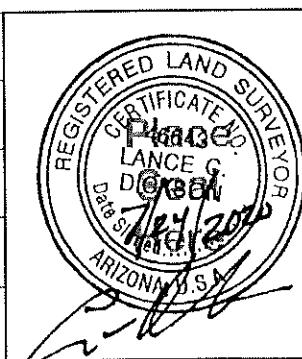
State
Arizona

ZIP Code

Signature


Date
07-24-2020

Telephone
(602) 246-9919



Ex.

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

Comments (including type of equipment and location, per C2(e), if applicable)

Benchmark Held: Southeast corner of Section 33, T5N, R6E. GLO Cap Elevation=2086.59 (NAVD 88)

Air unit on South side of home 3 feet above adjacent grade.

Crawl space elevation shown in C2a is an average of 3 elevation changes. Lowest 2050.80, Middle 2052.30 Highest 2052.90

ELEVATION CERTIFICATE**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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

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City Scottsdale	State Arizona	ZIP Code 85262	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption North side date of photo 07-24-2020

Clear Photo One



Photo Two

Photo Two Caption West side, HAG date of photo 07-23-2020

Clear Photo Two

ELEVATION CERTIFICATE**BUILDING PHOTOGRAPHS**

Continuation Page

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

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. 26630 N. 162nd St			Policy Number:
City Scottsdale	State Arizona	ZIP Code 85262	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.

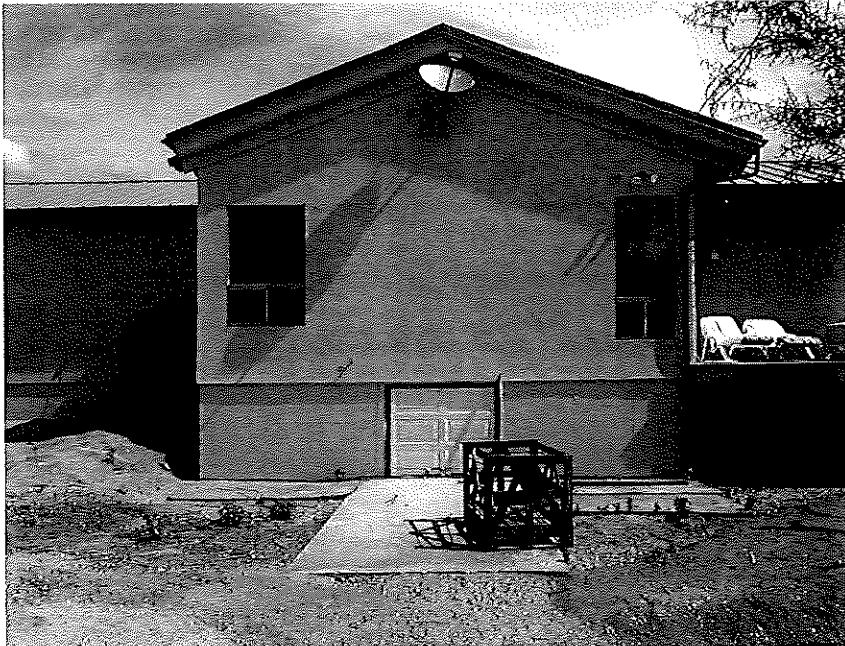


Photo Three

Photo Three Caption South side, outside access to crawl space date of photo 07-23-2020

Clear Photo Three

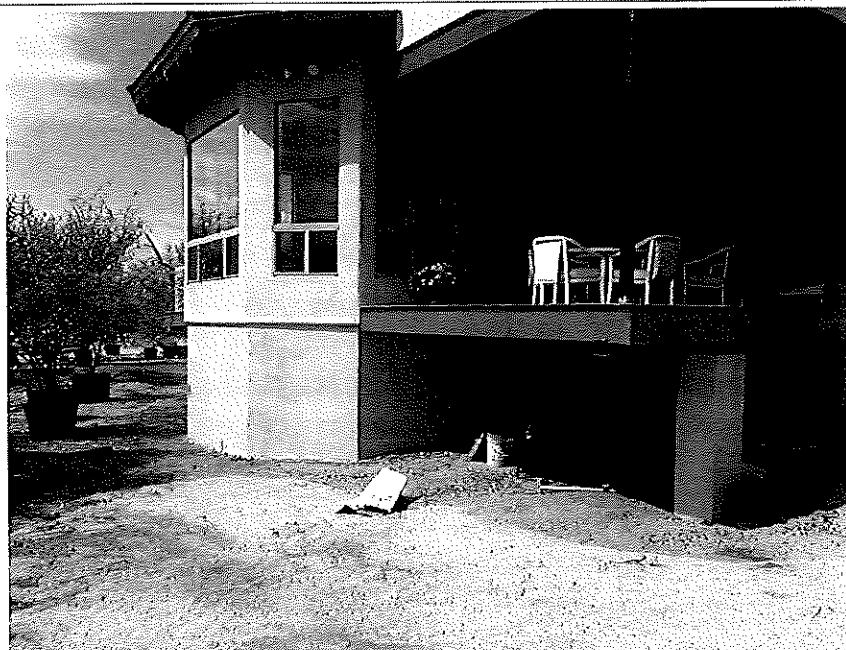


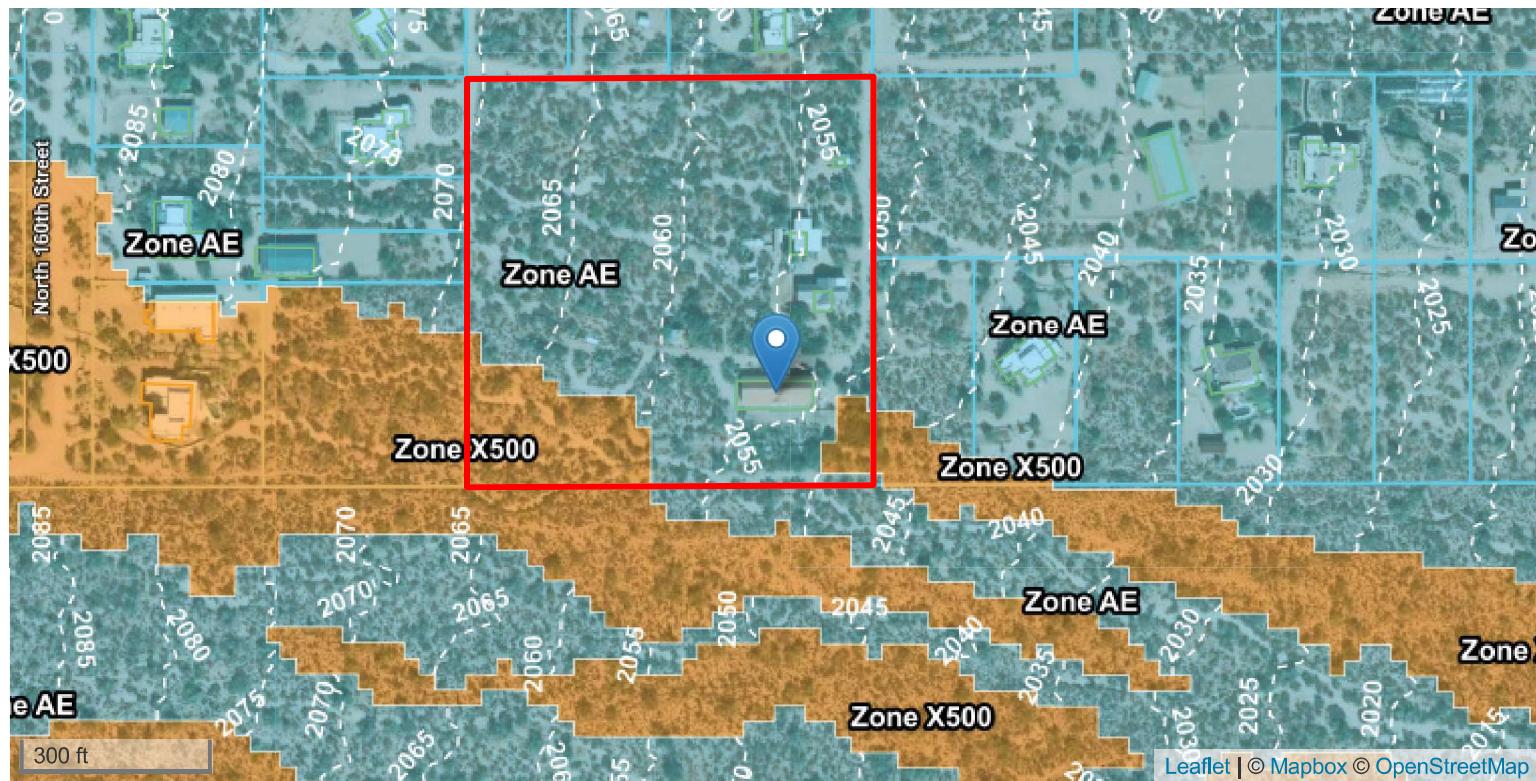
Photo Four

Photo Four Caption East side, LAG date of photo 07-23-2020

Clear Photo Four

FloodRisk Standard

Provided Location	26630 N 162 ST, SCOTTSDALE, AZ 85262		
Standardized Location	26630 N 162ND ST, SCOTTSDALE, AZ 85262-7883		
Latitude, Longitude	33.727388, -111.731039	Parcel ID	21937646
FIPS / MSA / Tract	04013 / 38060 / 101.03	Community No.	040037
Community Name	MARICOPA COUNTY*		
County Name	UNINCORPORATED AREAS		



Flood Zone	Zone AE	Next Nearest Zone (Dist.)	X500 (100 ft)
BFE	2055 Feet NAVD88 (2053.06 ft NGVD29)	USGS Ground Elev	2055 ft NAVD88
FEMA Map	04013C1351M, 11/04/2015	Previous Map	04013C1276G, 09/30/2005, Zone X
NFIP Status	PARTICIPATING	NFIP Program	REGULAR
LOMA or LOMR	NO	CBRS / OPA	NO
Claims* \$ / #	\$5,244,154 / 467	NFIP PIF*	2248
Flood Source	1137 ft	Salt Water	>6 miles
			Fresh Water
			334 ft

*Aggregated by NFIP community.



Farmers Insurance Company of Arizona
PO Box 2057 Kalispell MT 59903 USA

Farmers Insurance Company of Arizona
<https://www.farmers.com/>
(888) 391-2810
NAIC# : 21660

PROPERTY ADDRESS #: 26630 N 162 ST, Scottsdale, AZ, 85262
POLICY #: FLD1660003120
NFIP POLICY #: 1660003120
POLICY TERM: 12-21-2023 (At time of loan closing) - 12-21-2024 (12:01 AM)
POLICY ISSUED BY: Farmers Insurance Company of Arizona
PAYOR: BURKE, RONALD L & BONNIE

POLICY FORM: Dwelling Policy
POLICY DECLARATIONS TYPE: New Policy Declarations
RATE CATEGORY : RatingEngine

INSURED NAME & MAILING ADDRESS

AGENT CONTACT INFORMATION

BURKE, RONALD L & BONNIE & THE BURK FAMILY TRUST,
BONITA & RONALD BURK
26630 N 162 St,
Scottsdale, AZ, 85262

Scott Schlossberg
Tiffany Deloach
17100 E SHEA BLVD STE 200, Fountain Hills, AZ, 85268

Phone : 4808330194

FLOOD INSURANCE POLICY DECLARATIONS

This Declarations Page is part of your policy. THIS IS NOT A BILL.

Policy Coverages & Endorsements

	COVERAGE	DEDUCTIBLE	\$ 965
Building	\$ 250,000	\$ 2,000	
Contents	\$ 100,000	\$ 2,000	Total Annual Payment

Coverage limitations may apply. See your Policy Form for details.

Includes Premium, Discounts, Fees, and Surcharges

Property Information

Premium Calculations

Primary Residence	YES
Building Occupancy	Single Family
Building Description	Main House/Building
First Floor Height (FFH)	1
Method Used to Determine FFH	EC
Property Description	Slab on Grade (non-elevated), 1 Floors , Frame
Date of Construction	12-31-1984
Prior NFIP Claims	0 Claim(s)

Your property's NFIP flood claims history can affect your premium.

COMPONENTS OF THE TOTAL	PREMIUM
Building Premium:	\$ 615
Contents Premium:	\$ 363
Increased Cost of Compliance (ICC) Premium:	\$ 19
Community Rating System Discount:	\$ (240.00)
Full-Risk Premium:	\$ 757
Discounted Premium:	\$ 757
Fees and Surcharges:	
Reserve Fund Assessment:	\$ 136
HFIAA Surcharge:	\$ 25
Federal Policy Fee:	\$ 47
Total Premium	\$ 965

ADDITIONAL INTERESTS

First Mortgagee
FINEMARK NATIONAL BANK AND TRUST ISAOA,
PO BOX 1354,
Kennesaw, Cobb County, GA, 30156
Loan # : 30156

ADDITIONAL INSURED
THE BURK FAMILY TRUST, BONITA & RONALD BURK ,
26630 N 162 St

Date Mailed: 12-28-2023

If there have been any mortgagee changes, please make sure your profile reflects the changes.
For questions about your flood insurance rating, contact your agent or insurance company.
To learn more about your flood risk, please visit FloodSmart.gov





STANDARD FLOOD INSURANCE APPLICATION

PO Box 2057 Kalispell MT 59903 USA

Farmers Insurance Company of

Arizona

<https://www.farmers.com/>

(888) 391-2810

Date 12-18-2023	Application Number FLD1660003120	Effective Date 12-21-2023	Expiration Date 12-21-2024	Waiting Period Loan Transaction - No Wait
Insured Name(s) BURKE, RONALD L & BONNIE	Mailing Address & Phone 26630 N 162 St, Scottsdale, AZ, 85262	Property Address 26630 N 162 ST, 85262, Scottsdale, AZ	Agency Name, Address & Phone 17100 E SHEA BLVD STE 200, Fountain Hills, AZ, 85268	
	Home Phone: Work Phone: Cell Phone:(480)720-8001 Email:bonnie@bonnieburke.com	Property Address Type: Location	Email: sschlossberg@farmersagent.com Phone Number: 4808330194 Agent Name: SCOTT SCHLOSSBERG	

Applicant Type: INDIVIDUAL

Prior Company NAIC:

Prior Policy Number:

Prior Company Name:

Renewal Billing:

Other Policy Number:

Potential Duplicate Policy:

1st Mortgagor

FINEMARK NATIONAL BANK AND TRUST ISAOA

PO BOX 1354,

Kennesaw, Cobb County , GA, 30156

Phone Number:

Fax Number:

Loan Number: 30156
Required under

Mandatory

Purchase:

Current Community Information

Community Name:

Community Number: 040037

Map Panel: 1351

Map Panel Suffix: M

Current Flood Zone: AE

Current Base Flood Elevation(BFE): 2055

FIRM Date: 07-02-1979

Program: FLOODREGULAR

Program Status:

County:

Current Map Date: 11-04-2015

Rating Map Date:

Prior Community Information

Community Number:

Map Panel:

Map Panel Suffix:

Flood Zone:

FIRM Date: 07-02-1979

Has This Property Been Remapped?:

Map Revision Date:

Prior Policy Information

Is this a new purchase (within the last year)?: NO

Prior Owner Policy Number:

Prior Owner Company Name:

Did the applicant have a prior NFIP policy for the building that lapsed?:

Was the policy receiving a PRE-FIRM or Newly Mapped discount?:

Mapped discount when it lapsed?:

Did the Policy lapse for a valid reason?:

Construction Date

Date of Original Construction: 12-31-1984

Building Substantially Improved: NO

Post-FIRM Construction: YES

Substantial Improvement Date:

Building is on list of Historic Buildings:

Occupancy Information

Occupancy Type: Single Family

Building Description:

Is this the Applicant's Primary

Residence: YES

Is the insured a small business with less than 100 employees?: NO

Is the insured a nonprofit entity?: NO

Date:

APC PRV 07 21





STANDARD FLOOD INSURANCE QUOTE

PO Box 2057 Kalispell MT 59903 USA

Farmers Insurance Company of

Arizona

<https://www.farmers.com/>

(888) 391-2810

Date	Application Number	Effective Date	Expiration Date	Waiting Period
12-18-2023	FLD1660003120	12-21-2023	12-21-2024	Loan Transaction - No Wait

Building Information

Building Located In CBRS/OPA: NO

CBRS/OPA Designation Date:

If the building is in the buffer zone, did USFWS issue an official determination showing the building outside the system unit or OPA?:

Is the building use consistent with the protected area purpose?:

Prior NFIP Claims:

Building Severe Repetitive Loss (SRL)

Property:

Property on NFIP SRL list, Document(s) provided indicating non-SRL:

Coverage Req'd for Disaster Assistance:

Building Located Over Water: Not over Water

Building in Course of Construction: NO

Building Construction Type: Frame

Construction Type Description:

Estimated Building Replacement Cost: 939000

Replacement Cost Value Returned by FEMA: 351011

Total sq. footage of building: 2100

Total # of floors in building: 1

Total # of units in building: 1

What floor is the unit located on?:

Number of Detached Structures: 0

Building Located on Federal Land:

Is the policy force-placed by the lender?:

Foundation Information

Foundation: Slab on Grade (non-elevated)

Enclosure/Crawlspace Size:

Number of Elevators:

Mobilehome/Travel Trailer Information

On Permanent Foundation:

Anchored By:

Serial Number:

Venting Information (excluding V-Zones)

Enclosure/Crawlspace Has Valid Flood Openings:

Number of Openings:

Area of Permanent Openings (Sq. In.):

Has Engineered Openings:

Building Machinery, Equipment and Appliances

Does the building contain appliances?:

Are all appliances elevated above the first floor?:

Does the building contain machinery and equipment servicing the building?:

Is all machinery and equipment servicing the building, located inside or outside the building, elevated above the first floor?: NO

Elevation Certificate Information

Elevation Certificate Section Used: C

Elevation Certificate Date: 07-24-2020

Diagram Number: 1A

Top of Bottom Floor: 2057

Top of Next Higher Floor:

Lowest Adjacent Grade (LAG): 2056

Floodproofing Certificate:

Flood Proofing Elevation:

Lowest (Rating) Floor Elevation:

Elevation Certificate First Flood Height:

FEMA First Floor Height:

First Floor Height Method Used: EC

Premium Calculations

RISK RATING 2.0	COVERAGE	DEDUCTIBLE	COMPONENTS OF THE TOTAL	AMOUNT DUE
Building	250,000.00	2,000.00	Building Premium:	\$ 615.00
Content	100,000.00	2,000.00	Content Premium:	\$ 363.00
			Increased Cost of Compliance (ICC) Premium:	\$ 19.00
			Mitigation Discount:	\$ 0.00
			Community Rating System Reduction:	\$ (240.00)
			Full Risk Premium:	\$ 757.00
			Annual Increase Cap Discount:	\$ 0.00
			Pre-Firm Discount:	\$ 0.00
			Discounted Premium:	\$ 757.00
			Reserve Fund Assessment:	\$ 136.00
			HFIAA Surcharge:	\$ 25.00
			Federal Policy Fee:	\$ 47.00
			Probation Surcharge:	\$ 0.00
			Total Quoted Premium	\$ 965.00

Signature of Insurance Agent/Producer

Date

Signature of Policy Holder (Optional)

Date

Date:

APC PRV 07 21



FLD1660003120 / BURKE, RONALD L & BONNIE

26630 N 162 ST, Scottsdale, Maricopa County, AZ, 85262 -
7883

bonnie@bonnieburke.com
(480)720-8001 

26630 N 162 St, Scottsdale, Maricopa County, AZ, 85262 -
7883

Renew indicator : BATCH RENEWAL

Agent Tasks : File complete

Term Start Date :	12/21/2023	Term End Date :	12/21/2024	Transaction Type :	New Busi Business
Transaction Eff. Dt. : Last Updated By :	12/21/2023 MARCUS DUNCAN	Waiting Period: Applicant Date :	Loan Transaction - No Wait 12/18/2023	last Updated Date :	12-28-20
Claims	0	Loss Run		Risk Rating	2.0
Total Premium Change :	\$965.00	Bill To :	POLHOLDER	Serv Rep :	
Total Premium :	\$965.00			U/writer :	
				Product Name :	Flood Prc

Coverage

Property Info

Additional info

Billing

Account View	Receivable View	Invoicing	Subledger		Unposted
Policy Transaction					
ACCOUNTING DT.	TRANS TYPE	TRANS REF	CHECK NO	CERTIFIED DATE	DEBIT
12/18/2023	PAYMENT	F216600003196		12/18/2023	\$0.00
12/28/2023	INVOICE	INV00779792			\$965.00
					\$0.00
					\$0.00
					12/

Forms

Tickets

Commission

Log Documents Agent Customer
Portal Portal

Term Selection: (1114626)

12-21-2023/12-21-2024

Transaction Selection: (1505154)

NEWBUSINESS - ISSUED

Last transaction

New Business by MARCUS
DUNCAN
Transaction date: 12-28-2023
Transaction Eff. Dt. 2023-12-
21

Note

(03-22-2024) spoke with the
agent wants to know if policy
already issued

Agency Info

08802-02491-000 Scott
Schlossberg
Tiffany Deloach

[Notes](#)[System Log](#)[Pivot Response Log](#)**Notes**[Print Log](#)

Type note here

0/500

Make hidden? : [Save Note](#)[Reset](#)

Date	Description	Inserted By	Mark Hidden
03-22-2024 6:33:32 PM	spoke with the agent wants to know if policy already issued	JOSEPH BAUTISTA	<input type="checkbox"/>
03-05-2024 6:56:48 PM	Agt closed the chat.	SYDNEY PASIA	<input type="checkbox"/>
12-28-2023 9:57:31 AM	Aprvd NB effective LC date of 12/21/23. Premium received within 9 days of LC date. Removed EC from rating as no current dated photos were received. Addressed match for Primary Residence	MARCUS DUNCAN	<input type="checkbox"/>