

**CITY OF BURLINGTON
BUILDING PERMIT APPLICATION**

Date Issued Aug 20, 2019 Permit # 854
 Name (owner) Daniel & Brandy Ruby Contractor: _____
 Job/Property Address 7621 SW County Rd 15 West
 Legal Description Lot J Replat 04 12 of SWSE 51-155-84

Flood Plain Approval City: _____ Township _____

signature		signature	
Floodplain Permit Application Required	Yes _____ No _____	Burlington Township	Andy Fimrite Phone 725-4675
Type of Work	Foundation Structure	Kirkelie Township	Derrill Fick 725-4357
Demolish <u>4ft X</u>	Concrete Masonry	Roof	
Enlarge _____	Masonry Pole	<u>X</u> Asphalt or Wood Shingles	
Erect _____	Piers Steel	Built Up _____ Shakes	
<u>X</u> Move _____	Wood <u>X</u> Wood	Metal _____ Ties	
Remodel _____		Shakes _____	
Repair _____			
To be used for:	Flood Elevation Certificate required? <u>(Coming)</u>		
	<u>25' x 36 attached garage</u>		

FOUNDATION:	FRAME:	Size	Spacing	Span
Wall Thickness _____	Joists - 1st Floor _____			
Size of Footing _____	Joists - 2nd Floor _____			
Depth in Ground _____	Joists - Ceiling (Trussed) _____			
	Rafters (Trussed) _____			
INTERIOR SUPPORTS:	Exterior Studs _____			
Columns: Wood _____	Interior Studs _____			
Pipe _____	Bearing Wall Studs _____			
Girders: Wood _____	Bracing _____			
Steel _____	COVERING:			
Bearing Walls: _____	Exterior Walls _____			
Block _____	Interior Walls _____			
Wood _____				

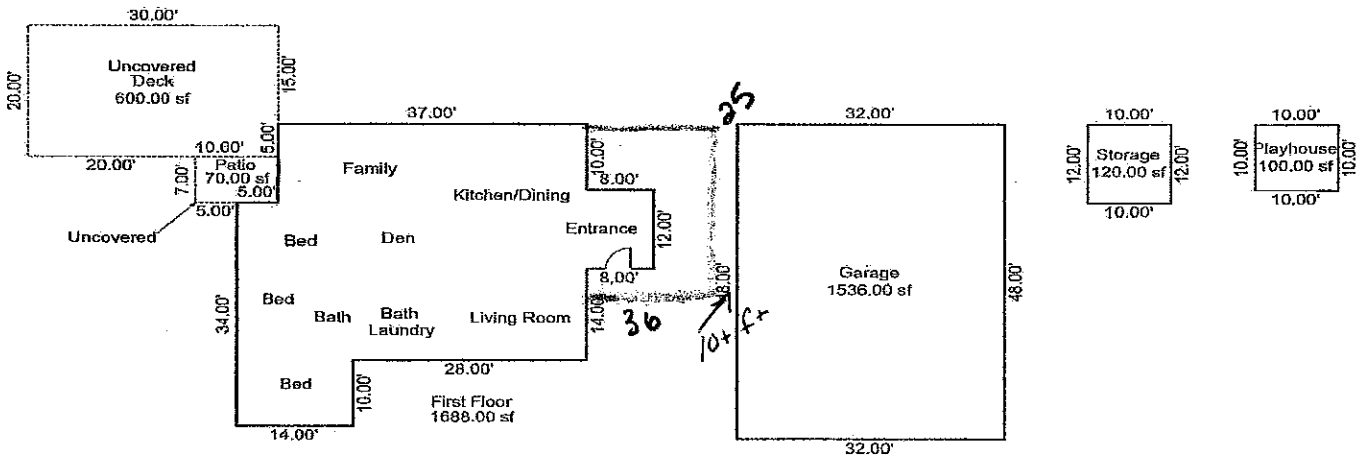
LOT SIZE:	INSPECTION FEE: <u>60</u>
Main Floor _____ x \$140 = _____	Aid to New Const Fee
2nd Floor _____ x \$80 = _____	Single Family Dwelling _____
Fin. Basement _____ x \$80 = _____	Townhouse _____
Unfin. Basement _____ x \$40 = _____	Apartment _____
Det. Garage _____ x \$40 = _____	Commercial/Industrial _____
Att. Garage <u>900</u> x \$55 = <u>49 000</u>	
Deck _____ x \$30 = _____	Manufactured Homes:
Crawlspace _____ x \$40 = _____	Certified Installer/Inspector Name: _____
Fireplace _____ 3000 = _____	Registration Number: <u>X</u>
TOTAL COSTS \$ <u>49 000</u>	TOTAL AMOUNT DUE: \$ <u>217</u>
PERMIT FEE \$ <u>157</u>	

I hereby acknowledge that I have made this application and that the above information is correct. I agree to comply with all City Ordinances and State Laws regulating building construction. I understand that the permit shall be issued after the Building Inspector has had a reasonable time to examine the application and amendments thereto and the location or building site. I understand it is my responsibility to contact the State for electrical and plumbing and fire inspections. Separate permits are required for electrical, plumbing and mechanical (HVAC). Work under this permit must commence within 180 days of permit issuance and, once commenced, work may not be suspended for more than 60 days. Permittee must comply with all codes and ordinances applicable to the work. Issuance of this permit does not grant any authority to erect, modify or use any structure in violation of any code or ordinance. All required inspections, including final inspection, must be requested by the Permittee. In consideration for connection to City utilities, Permittee agrees to pay all applicable utility fees and charges pursuant to City Ordinance. This permit creates no warranties with regard to construction or code compliance. Any inspection under this permit are for the benefit of the public and not the permit recipient and any inspections do not create a duty to the permit recipient, the owner or to a subsequent purchaser with regard to quality of construction or code compliance.

Signature Brandy Ruby Phone # 701-720-9035

SKETCH ADDENDUM

Intended User **Daniel and Brandy Ruby**
 Property Address **7621 County Rd 15 W**
 City **Minot** County **Ward** State **ND** Zip Code **58703-8868**
 Client **Daniel and Brandy Ruby**



Highway Ct Rd 15
(not 125' to structures)
Zone X

Sketch by Apex Sketch

AREA CALCULATIONS SUMMARY					AREA CALCULATIONS BREAKDOWN					
Code	Description	Factor	Net Size	Perimeter	Net Totals	Name	Base x	Height x	Width =	Area
GLA1	First Floor	1.00	1688.00	192.00	1688.00	First Floor		12.00 x	8.00 =	96.00
GAR	Garage	1.00	1536.00	160.00	1536.00			34.00 x	14.00 =	476.00
OTH	Storage	1.00	120.00	44.00				12.00 x	9.00 =	108.00
	Playhouse	1.00	100.00	40.00	220.00			36.00 x	28.00 =	1008.00
P/P	Patio	1.00	70.00	34.00						
	Deck	1.00	600.00	100.00	670.00					
Net LIVABLE			(rounded)	1,688	4 total items (rounded)					1,688

getting elev. cert.

I don't see any issues with the building permit as submitted. I would like to attach 1 condition to the building permit that an elevation certificate be obtained upon completion of the garage.

The reason is although the elevation certificate is correct that the current building is in Zone X, the floodway appears to back up against the building or within a few feet. The BFE at the building site is 1570.9 and I would recommend that the Council follow the floodplain regulations for construction of the building to be 3' above the BFE. The reason is that the preliminary maps will raise the BFE at this location by approximately 3 feet. Based on the elevation cert provided, the crawl space elevation is at approximately the required elevation.

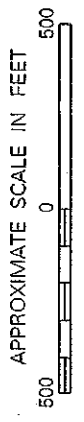
Patrick D. Samson, PE
Vice President
Senior Civil Engineer
Ackerman-Estvold
1907 17th Street SE
Minot, ND 58701
Office: 701.837.8737
Direct: 701.857.9150

www.ackerman-estvold.com

Follow us on [Facebook](#), [LinkedIn](#) and [Twitter!](#)



Please consider the environment before printing this e-mail



NATIONAL FLOOD INSURANCE PROGRAM

FIRM
FLOOD INSURANCE RATE MAP


WARD COUNTY,
 NORTH DAKOTA, AND
 INCORPORATED AREAS

PANEL 568 OF 1475
 (SEE MAP INDEX FOR PANELS NOT PRINTED)

CONTAINS:	COMMUNITY	NUMBER	PANEL	SUFFIX
BURLINGTON CITY OF	38401	568	0568	D
BURLINGTON, TOWNSHIP OF	38402	0568	0568	D

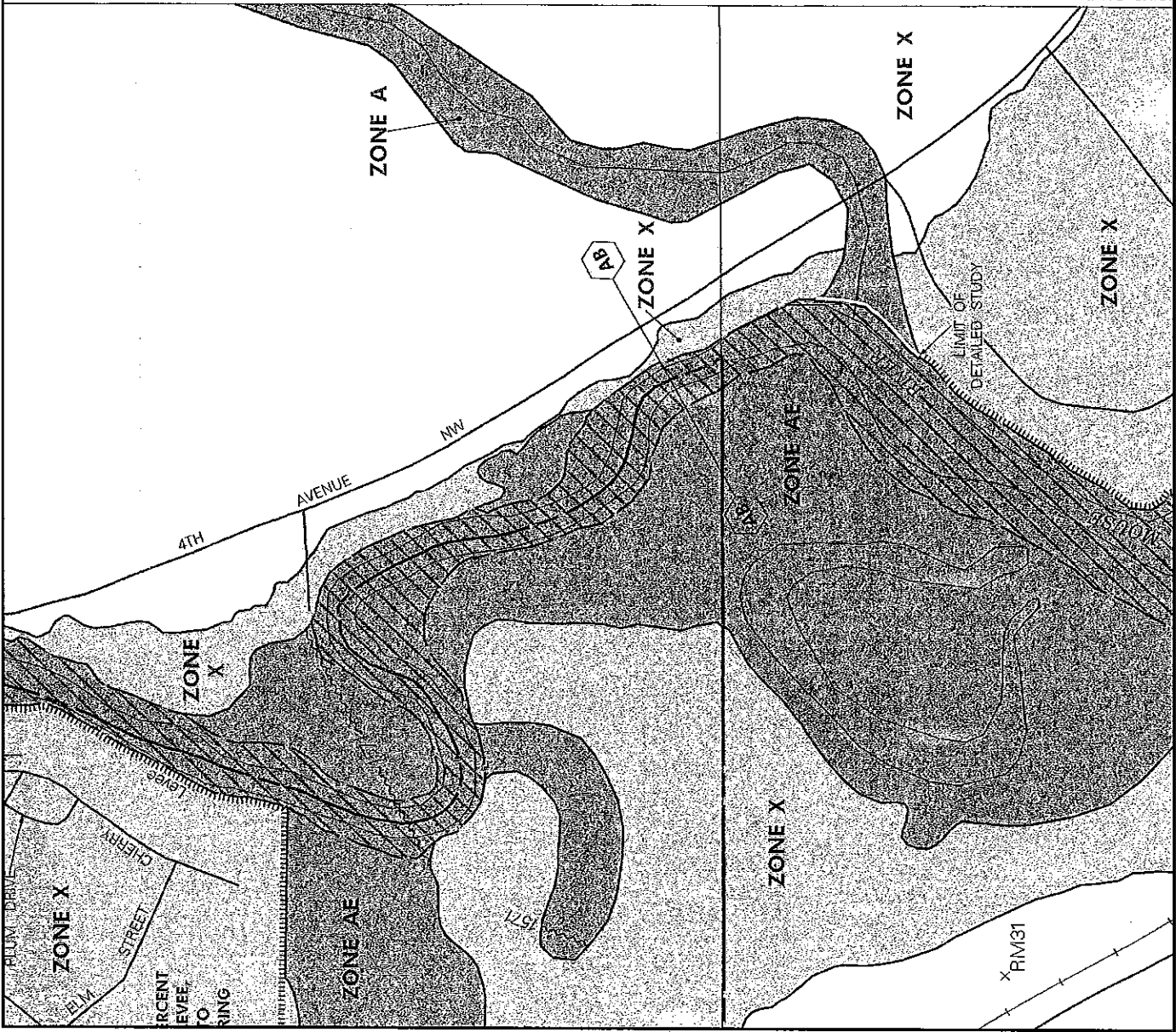
MAP NUMBER
 38401C0568 D

EFFECTIVE DATE:
 JANUARY 19, 2000



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEIMA Flood Map Store at www.msc.fema.gov



JOINS PANEL 0570

FLOODING SOURCE		FLOODWAY				BASE FLOOD WATER-SURFACE ELEVATION			
CROSS SECTION	DISTANCE ¹	WIDTH (FEET)	SECTION AREA (SQUARE FEET)	MEAN VELOCITY (FEET PER SECOND)	REGULATORY	WITHOUT FLOODWAY	WITH FLOODWAY	INCREASE	
						(FEET NGVD)			
Mouse River (Cont'd)									
AA	386.43	140	1,833	2.7	1,569.8	1,569.8	1,570.1	0.3	
AB	387.68	105	1,503	3.3	1,570.6	1,570.6	1,570.9	0.3	
AC	391.19	1,110	9,475	0.5	1,572.4	1,572.4	1,573.2	0.8	
AD	396.75	1,167	6,896	0.7	1,572.6	1,572.6	1,573.3	0.7	
AE	401.71	750	3,382	1.3	1,574.1	1,574.1	1,574.6	0.5	
AF	405.02	1,700	5,387	0.8	1,575.4	1,575.4	1,575.8	0.4	
AG	410.10	2,460	11,369	0.4	1,579.3	1,579.3	1,579.3	0.0	
AH	411.98	1,730	5,157	0.9	1,580.0	1,580.0	1,580.0	0.0	
AI	416.77	2,000	6,806	0.7	1,580.5	1,580.5	1,580.5	0.0	
AJ	420.05	1,616	3,796	1.2	1,582.7	1,582.7	1,582.8	0.1	

¹Miles above mouth

T A B L E 4

FEDERAL EMERGENCY MANAGEMENT AGENCY
WARD COUNTY, ND
AND INCORPORATED AREAS

FLOODWAY DATA

MOUSE RIVER



FLOOD POLICY DECLARATIONS

ASSURANT* American Bankers Insurance Company of Florida
Scottsdale, AZ 85261-4337

Preferred Risk

Type: New Business

Policy Period: 10/05/2018 To 10/05/2019

Original New Business Effective Date: 10/05/2018

Reinstatement Date:

Form: Dwelling

To report a claim call: (800) 423-4403

These Declarations are effective

as of: 10/05/2018 at 12:01 AM

Address Info

Producer Name and Mailing Address:

JOSHUA RESSLER AGENCY INC
300 3RD AVE SW SUITE C
MINOT, ND 58701

Insured Name and Mailing Address:

RUBY, BRANDY
RUBY, DANIEL
7621 COUNTY ROAD 15 W
MINOT, ND 58703-8868

NFIP Policy Number: 7405875610

Agent/Agency #: 70001-01298-000

Reference #:

Phone #: (701) 852-3116

NAIC Number: 10111

Processed by:

Flood Service Center

P.O. Box 8695 Kalispell MT 59904-8695

Property Info

Property Location:

7621 COUNTY ROAD 15 W
MINOT, ND 58703-8868

Building Description:

Single Family
Two Floors
Above Grade Crawlspace
Main House
Dwelling

Primary Residence: Y

Premium Payor: Insured

Flood Risk/Rated Zone: X Current Zone:

Community Number: 38 0650 0568 D

Community Name: BURLINGTON, TOWNSHIP OF

Grandfathered: NO

Pre-Firm Construction

Program Type: Regular

Newly Mapped into SFHA:

Elev Diff: N/A

Elevated Building: Y

No Addition(s) and Extension(s)

Replacement Cost: \$250,000

Number of Units: 1

Coverage & Rating

Type	Coverage	Rates	Deduct	Discount	Sub Total	Premium Calculation	
Building	250,000	/	1,250			Premium Subtotal:	344.00
Contents	100,000	/	1,250			Multiplier:	
Contents Location	Basement or Enclosure and Above					ICC Premium:	4.00
						CRS Discount:	.00
						Reserve Fund Assmt:	52.00
						HFIAA Surcharge:	25.00
						Federal Policy Fee:	25.00
						Probation Surcharge:	.00
						Endorsement Amount:	.00
						Total Premium Paid:	450.00

Coverage Limitations May Apply. See Your Policy Form for Details.

Mortgage Info

First Mortgage:

ND HOUSING FINANCE AGENCY
ITS SUCCESSORS AND/OR ASSIGNS
PO BOX 1535
BISMARCK, ND 58502-1535
Loan#: 0112046796

Loss Payee:

Second Mortgage:

Disaster Agency:

PREFERRED RISK FLOOD INSURANCE APPLICATION

QUOTE NUMBER:

200483787

POLICY NUMBER:

ALTERNATE POLICY NUMBER:

COMMUNITY INFORMATION	Current Community Number: 380650 0568 D	CONSTRUCTION INFORMATION	Date of Construction: 4-1-1920
	Initial Map Date: 2-19-1982		Date of Construction Source: Original Construction Date
BUILDING INFORMATION	Current Map Date: 1-19-2000	OCCUPANCY INFORMATION	Date of Substantial Improvement:
	Program Type: Regular		Building in Course of Construction: No
ENCLOSURE INFORMATION	County: WARD COUNTY	GARAGE INFORMATION	Building Walled & Roofed:
	Current Flood Zone: X		Building Over Water: Not over Water
BUILDING INFORMATION	Current BFE:	BASEMENT INFORMATION	Located on Federal Land: No
	Flood Zone Determination Number: 15892584		Occupancy: Single Family
BUILDING INFORMATION	Prior Community Number:	GARAGE INFORMATION	% of year Insured Resides: 80% or more; Principal/Primary Res
	Prior Flood Zone:		Number of Units: 1
ENCLOSURE INFORMATION	Newly Mapped Community Number: 380650 0568 D	GARAGE INFORMATION	Building Purpose: 100% Residential
	Newly Mapped Date: 01-19-2000		% of Residential Use:
ENCLOSURE INFORMATION	Rated Map Date: 01-19-2000	GARAGE INFORMATION	House of Worship: No
	Entire Building Coverage: Yes		Agricultural Structure: No
ENCLOSURE INFORMATION	Building Description: Main House	GARAGE INFORMATION	Business Property: No
	Building does not have addition(s) or extension(s)		Condo Form of Ownership: No
ENCLOSURE INFORMATION	Foundation: Above Grade Crawlspace	GARAGE INFORMATION	Condo Description: Not a Condo
	Below Grade All Sides: No		Rental Property: No
ENCLOSURE INFORMATION	Number of Floors: Two Floors	GARAGE INFORMATION	Is Insured a Tenant: No
	Attached Garage:		Is Tenant Requesting Building Coverage: No
ENCLOSURE INFORMATION	Attached Garage Location:	GARAGE INFORMATION	Attached to Building:
	Additional Building Description: Dwelling		Only Enclosure: No
ENCLOSURE INFORMATION	Severe Repetitive Loss Property: No	GARAGE INFORMATION	Garage Wall Material:
	Building Contains Elevator(s): No		Breakaway Walls:
ENCLOSURE INFORMATION	Number of Elevator(s):	GARAGE INFORMATION	Garage Used for Other Purposes:
	Elevator(s) below the Base Flood Elevation:		Garage Walls Finished:
ENCLOSURE INFORMATION	Contents Location: Basement/Enclosure/Crawlspace and Above	GARAGE INFORMATION	Size of Garage (sq. ft.):
	Lowest Floor Elevated By: Piers, Posts, or Piles		Area Contains Flood Vents/Permanent Openings:
ENCLOSURE INFORMATION	Enclosure Wall Material: Solid Wood Frame Walls	GARAGE INFORMATION	Number of Flood Vents/Permanent Openings w/in 1ft above the ground:
	Breakaway Walls:		Total Area of Vents (sq. in.):
ENCLOSURE INFORMATION	Enclosure Used for Other Purposes: No	GARAGE INFORMATION	Machinery or Equipment elevated to the Base Flood Elevation:
	Enclosure Walls Finished: No		Value of Machinery/Equipment: n/a
ENCLOSURE INFORMATION	Size of Crawlspace/Enclosure/Elevator(s) (sq. ft.): 1660	GARAGE INFORMATION	Value of Washers/Dryers/Food Freezers: n/a
	% of area below the elevated floor is enclosed: 100% Fully Enclosed		Basement Area Is:
ENCLOSURE INFORMATION	Number of Flood Vents/Permanent Openings w/in 1ft above the ground: 0	GARAGE INFORMATION	Machinery or Equipment elevated to the Base Flood Elevation: n/a
	Total Area of Vents (sq. in.): 0		Value of Machinery/Equipment: n/a
ENCLOSURE INFORMATION	Engineered Flood Openings: No	GARAGE INFORMATION	Value of Washers/Dryers/Food Freezers: n/a
	Machinery or Equipment elevated to the Base Flood Elevation: n/a		Washers: n/a Dryers: n/a Freezers: n/a
ENCLOSURE INFORMATION	Value of Machinery/Equipment:	GARAGE INFORMATION	Washers: n/a Dryers: n/a Freezers: n/a
	Value of Washers/Dryers/Food Freezers:		
ENCLOSURE INFORMATION	Washers: n/a Dryers: n/a Freezers: n/a	GARAGE INFORMATION	

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 Daniel P & Brandy L Ruby				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7621 W County RD 15				Company NAIC Number:	
City Minot		State North Dakota		ZIP Code 58703	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 3 Replat Outlot 12 of SWSE Section 1 Township 155 N Range 84 W					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. <u>48°16'12.16" N</u> Long. <u>101°24'42.18" 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>2A</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>3,600</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</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 _____ 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 in					
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 Township of Burlington 380650			B2. County Name Ward		B3. State North Dakota
B4. Map/Panel Number 38101C0568	B5. Suffix D	B6. FIRM Index Date 01/19/2000	B7. FIRM Panel Effective/ Revised Date 01/19/2000	B8. Flood Zone(s) X	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) NA
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 checked="" type="checkbox"/> NGVD 1929 <input 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					

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

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. 7621 W County RD 15			Policy Number:
City Minot	State North Dakota	ZIP Code 58703	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: NGS T 335 Vertical Datum: NGVD 1929

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>1574.3</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor | <u>1580.3</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | _____ | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | _____ | <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>1580.3</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>1573.2</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | <u>1580.5</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>1569.9</u> | <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.

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

Certifier's Name Thomas R. Leshovsky	License Number LS-6134	
Title Professional Land Surveyor		
Company Name Wold Engineering, P.C.		
Address 110 8th Ave SW		
City Minot	State North Dakota	
Signature 	Date 08/23/2019	Telephone (701) 852-0338

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)
All equipment servicing the building is located on the main floor.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

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. 7621 W County RD 15			Policy Number:
City Minot	State North Dakota	ZIP Code 58703	Company NAIC Number

**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 _____ 6.2 _____ 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 1–2 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 Brandy & Daniel Ruby

Address 7621 W County RD 15 City Minot State ND ZIP Code 58703

Signature Brandy Ruby Date 8/23/19 Telephone 701-720-9035

Comments

Check here if attachments.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

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. 7621 W County RD 15			Policy Number:
City Minot	State North Dakota	ZIP Code 58703	Company NAIC Number

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

Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

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. 7621 W County RD 15			Policy Number:
City Minot	State North Dakota	ZIP Code 58703	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 Front View

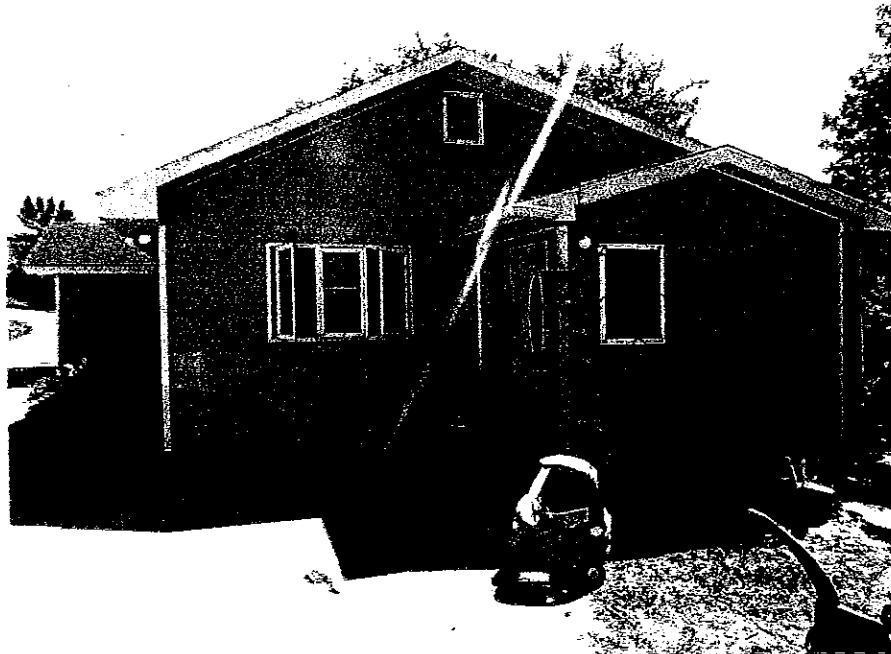


Photo Two

Photo Two Caption Right Side View

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008
Expiration Date: November 30, 2018

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. 7621 W County RD 15			Policy Number:
City Minot	State North Dakota	ZIP Code 58703	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 One

Photo One Caption Rear View

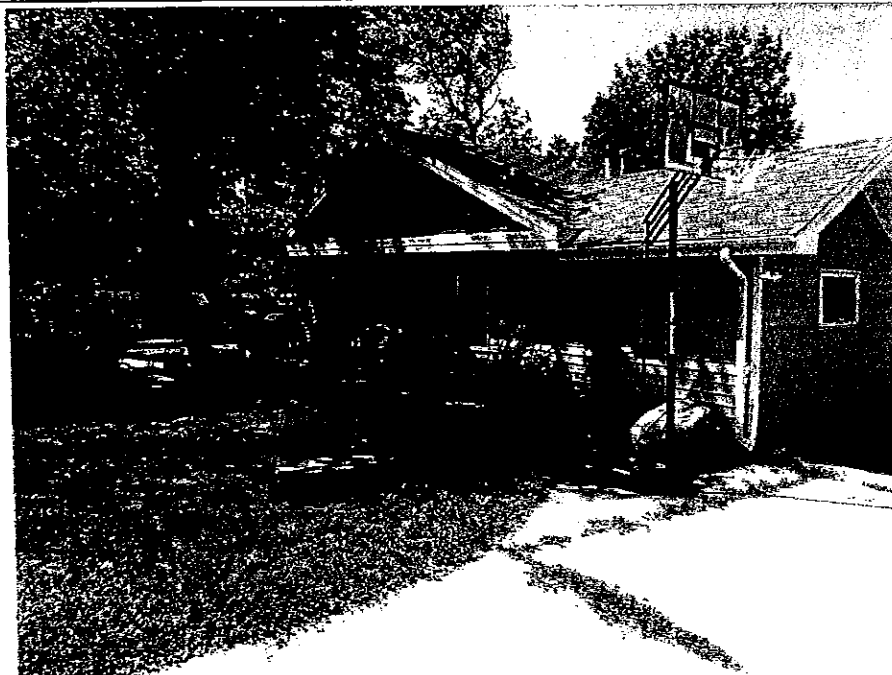


Photo Two

Photo Two Caption Left Side View