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CITY ENGINEER

1149 S. BROADWAY, SUITE 700
LOS ANGELES, CA 90015-2213

<http://eng.lacity.org>

MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with this community's participation in the National Flood Insurance Program's Community Rating System, all FEMA Elevation Certificates must be correct and complete. The attached Certificate has some incorrect items which are noted here.

| 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. 1500 W. Pacific Coast Hwy Bldg D | | | Company NAIC Number | |
| City | State | Zip Code | | |
| Los Angeles | CA | 90744 | | |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) | | | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) _____ | | | | |
| A5. Latitude/Longitude: Lat. _____ Long. _____ 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 _____ | | | | |
| A8. For a building with a crawl space or enclosures(s), provide | | | A9. For a building with an attached garage, provide: | |
| a) | Square footage of crawl space or enclosure(s) _____sq ft | | a) | Square footage of attached garage _____sq ft |
| b) | No. of permanent flood openings in the crawl space or enclosures(s) walls within 1.0 foot above adjacent grade _____ | | b) | No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____ |
| c) | Total net area of flood openings in A8.b _____sq in | | c) | Total net area of flood openings in A9.b _____sq in |

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

| | | | | | |
|---|------------|---------------------|---------------------------------------|-------------------|---|
| B1. NFIP Community Name & Community Number City of Los Angeles 060137 | | B2. County Name | | B3. State | |
| B4. Map/Panel Number | B5. Suffix | B6. FIRM Index Date | B7. FIRM Panel Effective/Revised Date | B8. Flood Zone(s) | B9. Base Flood Elevation(s) (Zone AO, use base flood depth) |

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 (Describe) _____

B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) _____

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-g below according to the building diagram specified in Item A7.

Benchmark Utilized _____ Vertical Datum _____

Conversion/Comments _____

COMMENTS:

Incorrect Community Number

Date of Review: 08/14/20 Community Official: 

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

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 DEL LAGO CITY VIEW 57, LP. | | | | Policy Number: | |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1500 W. PACIFIC COAST HIGHWAY BLDG D | | | | Company NAIC Number: | |
| City WILMINGTON | | State California | | ZIP Code 90744 | |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) ASSESSORS PARCEL NUMBER 7412-009-009 | | | | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u> | | | | | |
| A5. Latitude/Longitude: Lat. <u>33° 47' 24.56"</u> Long. <u>-118° 17' 03.69"</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): | | | | | |
| 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>908.2</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 LOS ANGELES 606037 | | | B2. County Name LOS ANGELES | | B3. State California |
| B4. Map/Panel Number 06037C1945 | B5. Suffix F | B6. FIRM Index Date 09/26/2008 | B7. FIRM Panel Effective/ Revised Date 09/26/2008 | B8. Flood Zone(s) AE | B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 19 FEET |
| 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 | | | | | |

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. 1500 W. PACIFIC COAST HIGHWAY BLDG D | | | Policy Number: |
| City WILMINGTON | State California | ZIP Code 90744 | 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 21-06949 Vertical Datum: 24.60ft NAVD88

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>24.18</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor | <u>34.55</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | <u>N/A</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | <u>23.5</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>24.2</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>23.3</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | <u>23.5</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>24.1</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 GERRY KEITH STUART | License Number CA LS 8866 |
| Title DIRECTOR OF SURVEY | |
| Company Name AXIS CIVIL SURVEY AND MAPPING INC. | |
| Address 43460 RIDGE PARK DRIVE SUITE 200 K | |
| City TEMECULA | State California |
| | ZIP Code 92590 |
| Signature  | Date 08/29/2016 |
| | Telephone (951) 699-3744 |



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)
 EXTERIOR ACCESS ELECTRICAL CLOSET LOCATED ON THE SOUTH EAST CORNER OF BLDG CONTAINS PANELS ON WALL FOR ELECTRICAL SWITCH GEAR, FIRE ALARM GEAR, METHANE SYSTEM WITH BATTERY BACKUP AND COMMUNICATION HARDWARE. FIRE RISER IS LOCATED ADJACENT.

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. 1500 W. PACIFIC COAST HIGHWAY BLDG D | | | Policy Number: |
| City WILMINGTON | State California | ZIP Code 90744 | 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 _____ 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 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 _____ 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

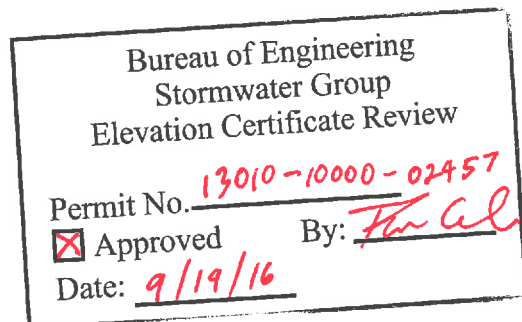
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name
GERRY KEITH STUART

| | | | |
|---|------------------|---------------------|-------------------|
| Address 43460 RIDGE PARK DRIVE SUITE 200 K | City TEMECULA | State California | ZIP Code 92590 |
|---|------------------|---------------------|-------------------|

| | | |
|--|--------------------|-----------------------------|
| Signature <i>Gerry Keith Stuart</i> | Date 08/29/2016 | Telephone (951) 699-3744 |
|--|--------------------|-----------------------------|

Comments



Check here if attachments.