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# CITY OF LOS ANGELES

CALIFORNIA



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PUBLIC WORKS**

**BUREAU OF  
ENGINEERING**

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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.<br>2604 Westwood Blvd |       |          | Company NAIC Number        |  |
| City  | State | Zip Code |                            |  |
| Los Angeles   | CA    | 90064    |                            |  |
| 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

|   |  |
|---|--|
| <p>a) Square footage of crawl space or enclosure(s) _____ sq ft</p> <p>b) No. of permanent flood openings in the crawl space or enclosures(s) walls within 1.0 foot above adjacent grade _____</p> <p>c) Total net area of flood openings in A8.b _____ sq in</p> | <p>A9. For a building with an attached garage, provide:</p> <p>a) Square footage of attached garage _____ sq ft</p> <p>b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____</p> <p>c) Total net area of flood openings in A9.b _____ sq in</p> |
|---|--|

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

|  |            |                     |                                       |                   |   |
|--|------------|---------------------|---------------------------------------|-------------------|---|
| B1. NFIP Community Name & Community Number<br>City of Los Angeles 060137 |            | B2. County Name     |                                       | B3. State         |   |
| B4. Map/Panel Number<br><b>06037C1595</b>                                | 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



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**SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)**

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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. Community number changed to “06037C1595”. No Attached Garage. Attached Garage Freeboard not applicable.**

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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<br>Evelina Mendicini  |                 |                                |   |                                | Policy Number:  |  |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br>2604 Westwood Boulevard  |                 |                                |   |                                | Company NAIC Number:  |  |
| City<br>Los Angeles   |                 | State<br>California            |   | ZIP Code<br>90064              |   |  |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)<br>Lots 20 & 105 Tract No. 12385, Map Book 261 pages 28-30, Records of Los Angeles County, California  |                 |                                |   |                                |   |  |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>   |                 |                                |   |                                |   |  |
| A5. Latitude/Longitude: Lat. <u>N 34°02'10.79"</u> Long. <u>W 118°25'30.61"</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>8</u> <input type="checkbox"/>   |                 |                                |   |                                |   |  |
| A8. For a building with a crawlspace or enclosure(s):   |                 |                                |   |                                |   |  |
| a) Square footage of crawlspace or enclosure(s) <u>1597</u> sq ft   |                 |                                |   |                                |   |  |
| b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>8</u>   |                 |                                |   |                                |   |  |
| c) Total net area of flood openings in A8.b <u>1632</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<br>City of Los Angeles 060137  |                 |                                |   | B2. County Name<br>Los Angeles |   | B3. State<br>California <input type="checkbox"/> |
| B4. Map/Panel Number<br>6037C1595   | B5. Suffix<br>F | B6. FIRM Index Date<br>9/26/08 | B7. FIRM Panel Effective/ Revised Date<br>9/26/08 | B8. Flood Zone(s)<br>AO        | B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)<br>1 foot |  |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:<br><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<br>Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA         |                 |                                |   |                                |   |  |

# ELEVATION CERTIFICATE

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

|   |                    |  |                                  |  |
|---|--------------------|--|----------------------------------|--|
| <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.<br><u>2604 WESTWOOD BLVD.</u> |                    |  | Policy Number:                   |  |
| City<br><u>LOS ANGELES</u>  | State<br><u>CA</u> | ZIP Code<br><input checked="" type="checkbox"/> <u>90064</u> | 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: B.M. 13-27400                      Vertical Datum: 163.003 feet (2000 adj.)

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>159.5</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor   | <u>161.8</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 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<br>(Describe type of equipment and location in Comments) | <u>161.8</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | <u>159.1</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | <u>159.7</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                                  | <u>159.5</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<br><u>Bruce K. Schofield</u> | License Number<br><u>PLS 3927</u> |
|---|-----------------------------------|

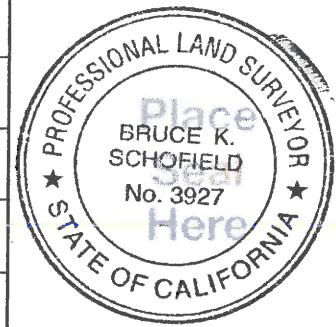
Title  
Owner

Company Name  
Bruce K. Schofield, Land Surveyor

Address  
21230 Escondido Street

|                               |                            |  |
|-------------------------------|----------------------------|--|
| City<br><u>Woodland Hills</u> | State<br><u>California</u> | ZIP Code<br><input checked="" type="checkbox"/> <u>91364</u> |
|-------------------------------|----------------------------|--|

|               |                        |                                  |      |
|---------------|------------------------|----------------------------------|------|
| Signature<br> | Date<br><u>2/20/18</u> | Telephone<br><u>818 451-9910</u> | Ext. |
|---------------|------------------------|----------------------------------|------|



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

Residential washer and dryer @ 1st level hallway

**ELEVATION CERTIFICATE**

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

|  |                    |  |                                  |  |
|--|--------------------|--|----------------------------------|--|
| <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.<br><b>2604 WESTWOOD BLVD</b> |                    |  | Policy Number:                   |  |
| City<br><b>LOS ANGELES</b>   | State<br><b>CA</b> | ZIP Code<br><input checked="" type="checkbox"/> <b>90064</b> | 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 \_\_\_\_\_ 0.2  feet  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ 0.4  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 \_\_\_\_\_ 2.1  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_ N/A  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ 2.1  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  
**Ray Spehar, Architect**

|  |                        |                            |  |
|--|------------------------|----------------------------|--|
| Address<br><b>6023 Etiwanda Avenue</b> | City<br><b>Tarzana</b> | State<br><b>California</b> | ZIP Code<br><input checked="" type="checkbox"/> <b>91356</b> |
|--|------------------------|----------------------------|--|

|               |                        |                                  |
|---------------|------------------------|----------------------------------|
| Signature<br> | Date<br><b>2/20/18</b> | Telephone<br><b>818 429-1809</b> |
|---------------|------------------------|----------------------------------|

Comments

Check here if attachments.

**ELEVATION CERTIFICATE**

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

|  |                    |  |
|--|--------------------|--|
| <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.<br><u>2604 WESTWOOD BLVD</u> |                    | Policy Number:   |
| City<br><u>LOS ANGELES</u>   | State<br><u>CA</u> | ZIP Code<br><input checked="" type="checkbox"/> <u>90064</u> |
|  |                    | 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<br><u>16014-30000-01432</u> | G5. Date Permit Issued<br><u>6/21/06</u> | 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: 161.80  feet  meters Datum NAVD 88

G9. BFE or (in Zone AO) depth of flooding at the building site: 1 FT  feet  meters Datum NAVD 88

G10. Community's design flood elevation: 161.74  feet  meters Datum NAVD 88

|  |                        |
|--|------------------------|
| Local Official's Name<br><u>Romano Galassi</u> | Title<br><u>CEA IV</u> |
|--|------------------------|

|  |                                  |
|--|----------------------------------|
| Community Name<br><u>City of Los Angeles</u> | Telephone<br><u>213 847-0405</u> |
|--|----------------------------------|

|  |                        |
|--|------------------------|
| Signature<br> | Date<br><u>2/21/18</u> |
|--|------------------------|

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

Residential washer and dryer @ 1st level hallway.

**Bureau of Engineering  
Stormwater Group  
Elevation Certificate Review**

Permit No. 16014-30000-01432

Approved By: Romano Galassi

Date: 2/21/18

Check here if attachments.

# BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

## ELEVATION CERTIFICATE

|   |                    |  |                                  |
|---|--------------------|--|----------------------------------|
| <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.<br><i>2604 Westwood Blvd.</i> |                    |  | Policy Number:                   |
| City<br><i>Los Angeles</i>  | State<br><i>CA</i> | ZIP Code<br><input checked="" type="checkbox"/> <i>90064</i> | 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 **WEST ELEVATION**

Clear Photo One



Photo Two

Photo Two Caption **WEST ELEVATION**

Clear Photo Two

# BUILDING PHOTOGRAPHS

## ELEVATION CERTIFICATE

Continuation Page

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

|  |                    |  |                                  |  |
|--|--------------------|--|----------------------------------|--|
| <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.<br><b>2604 WESTWOOD BLVD</b> |                    |  | Policy Number:                   |  |
| City<br><b>LOS ANGELES</b>   | State<br><b>CA</b> | ZIP Code<br><input checked="" type="checkbox"/> <b>90064</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.



Photo Three

Photo Three Caption **EAST ELEVATION**

Clear Photo Three



Photo Four

Photo Four Caption **EAST ELEVATION**

Clear Photo Four