U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

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

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							RANCE COMPANY USE	
A1. Building Owner's Name							ber:	
		cker Residential Trust						
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.						Company N	IAIC Number:	
41 Lakeview Circle								
City			State					
	Conway Arkansas 72032							
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 2 BLK 4 C J BALMAT SUB FD55 - Parcel ID 138-00068-000								
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential								
A5. Latitude/Longi	tude: Lat:	35° 1'32.05"N	Long.	92°24'16.80"\	V Horizonta	I Datum: 🔲 NAD 1	1927 🗷 NAD 1983	
A6. Attach at least	2 photograp	hs of the building if th	e Certific	ate is being ι	sed to obtain floo	d insurance.		
A7. Building Diagra	A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 6							
A8. For a building	with a crawls	pace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s) 2150.00 sq ft								
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 11								
c) Total net area of flood openings in A8.b sq in								
d) Engineered flood openings?								
A9. For a building with an attached garage:								
a) Square footage of attached garageN/A sq ft								
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A								
c) Total net area of flood openings in A9.b N/A sq in								
d) Engineered flood openings?								
	SE	ECTION B – FLOOD	INSURA	NCE RATE	MAP (FIRM) INF	ORMATION		
B1. NFIP Commun	ity Name & 0	Community Number		B2. County Name			B3. State	
Faulkner County 0	50431			Faulkner			Arkansas	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	: levation(s) e Base Flood Depth)	
0294	Н	09-27-1991	12-19-	2006	AE	272.0		
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/Source: B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:								
BTT. Indicate elevation datum deed for bit Limitem ba. INGVD 1929 INGVD 1900 Other/Source.								
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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IMPORTANT: In these spaces, copy the corresponding information from Sect	FOR INSURANCE COMPANY USE							
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route 41 Lakeview Circle	Policy Number:							
CityStateZIP CConwayArkansas7203		Company NAIC Number						
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)								
	ing Under Construg is complete. E), AR, AR/A, AR/A, Item A7. In Puerto NAVD 1988 7. EE. 26 26	ction*						
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support		66.90 x feet 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?								
CONWAY Arkansas	ZIP Code 72034	STATE OF ARKANSAS NO. 7755 ARKANSAS NO. 7755						
Signature Nicholas Tucker Nicholas Tucker Date 1994 A Spring by Michael Tucker 112-04-2019	Telephone (501) 328-3316	Ext.						
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) ONE STORY HOME ON CRAWL SPACE. MACHINERY IS AIR CONDITIONER, DETACHED GARAGE AS SHOWN HAS SAME FINISH FLOOR HEIGHT AS HO		OCKS. CARPORT ON HOUSE.						

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE See Instructions for Item A6. OMB No. 1660-0008

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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. Policy Number: 41 Lakeview Circle City State ZIP Code Company NAIC Number 72032 Conway Arkansas

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 HOUSE Clear Photo One



Photo Two Caption SIDE HOUSE

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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Expiration Date: November 30, 2018

IMPORTANT: In these spaces,	FOR INSURANCE COMPANY USE		
Building Street Address (includir 41 Lakeview Circle	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Conway	Arkansas	72032	

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 REAR HOUSE

Clear Photo Three



Photo Four Caption **DETACHED GARAGE** Clear Photo Four