

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM
ELEVATION CERTIFICATE

O.M.B. No. 3067-0077
Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME Kaufman & Broad South Bay, Inc.		E.O.I. Insurance Company Use	
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 164 Black Mountain Circle		Policy Number	
CITY Fremont	STATE California	Company NAIC Number	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 21, Tract 7042		ZIP CODE 94536	
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) Residential			
LATITUDE/LONGITUDE (OPTIONAL) (##-##-##.## or ##.####)		HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Fremont/1065028 0010C		B2. COUNTY NAME Alameda		B3. STATE California	
B4. MAP AND PANEL NUMBER 10 of 50	B5. SUFFIX	B6. FIRM INDEX DATE Feb. 9, 2000	B7. FIRM PANEL EFFECTIVE/REVISED DATE Feb. 9, 2000	B8. FLOOD ZONE(S) C, AH, B	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 45

10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe):
11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):
12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
Designation Date:

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

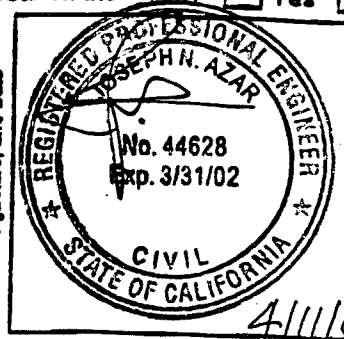
1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

2. Building Diagram Number _____ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

3. 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 C3a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum	Conversion/Comments
Elevation reference mark used	Does the elevation reference mark used appear on the FIRM? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	_____ 47.40 ft.(m)
<input type="checkbox"/> b) Top of next higher floor	_____ ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____ ft.(m)
<input checked="" type="checkbox"/> d) Attached garage (top of slab)	_____ 49.09 ft.(m)
<input checked="" type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	_____ ft.(m)
<input checked="" type="checkbox"/> f) Lowest adjacent grade (LAG)	_____ 48.6 ft.(m)
<input checked="" type="checkbox"/> g) Highest adjacent grade (HAG)	_____ ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	_____
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	_____ sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date



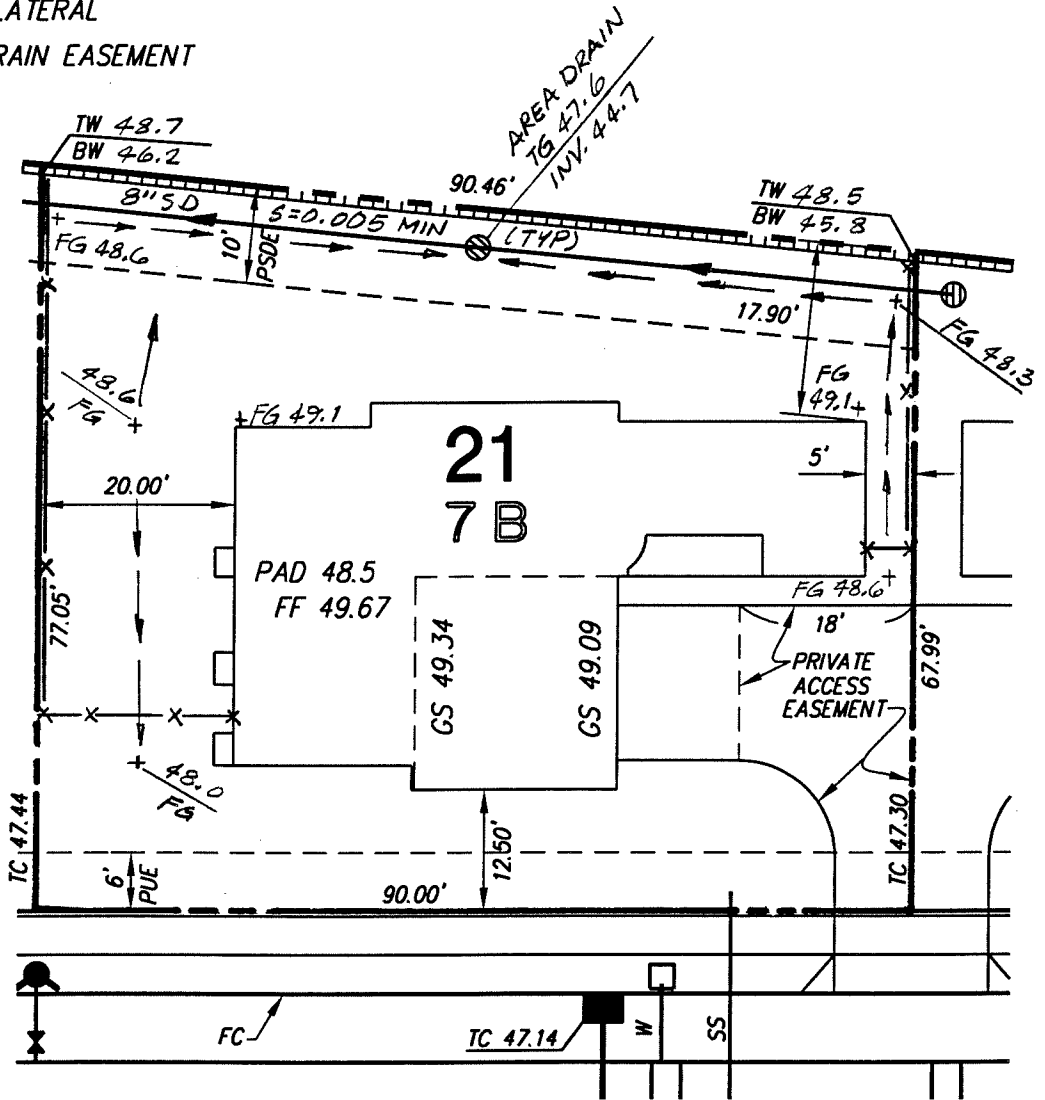
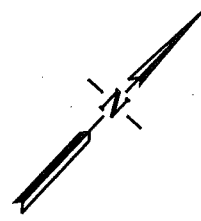
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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 in Sections A, B, and C 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.

CERTIFIER'S NAME Joseph N. Azar	LICENSE NUMBER 44628
TITLE Principal	COMPANY NAME Ruggieri-Jensen-Azar & Associates
ADDRESS 6601	CITY Pleasanton
SIGNATURE	STATE CA
	ZIP CODE 94588
	DATE 4/11/00
	TELEPHONE (925) 227-9100

LEGEND

- PAD PAD ELEVATION
- FF FINISHED FLOOR ELEVATION
- HP HIGH POINT
- 45.5 / FG FINISHED GRADE ELEVATION
- GS GARAGE SLAB ELEVATION
- TC TOP OF CURB
- FC FACE OF CURB
- PUE PUBLIC UTILITY EASEMENT
- SS SANITARY SEWER LATERAL
- PSDE PRIVATE STORM DRAIN EASEMENT
- CATCH BASIN
- ⊗ ELECTROLIER
- ⊕ FIRE HYDRANT
- W WATER METER
- ↔ SWALE (1.5% MIN)
- ▬ RETAINING WALL
- ▬ SLOPE
- ▬ HANDICAP RAMP
- E ELECTRICAL BOX
- T TELEPHONE BOX
- C CABLE TV BOX
- ▲ SUBSURFACE TRANSFORMER
- x—x— FENCE



NOTE:

SEE IRRIGATION PLANS FOR LOCATION OF IRRIGATION SLEEVES BEFORE POURING DRIVEWAY SLAB.

P-98-7

BLACK MOUNTAIN CIRCLE

**TRACT 7042- NILES STATION
LOT 21**

164 BLACK MOUNTAIN CIRCLE

FREMONT, ALAMEDA COUNTY, CALIFORNIA

Ruggeri - Jensen - Jazar & Associates
ENGINEERS • PLANNERS • SURVEYORS

6601 OWENS DRIVE, SUITE 155 • PLEASANTON, CA 94588
 PHONE: (925) 227-9100 • FAX: (925) 227-9300

SCALE:
1" = 20'

DATE:
5-12-99

JOB NO.:
971062