

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name <u>J. BERSCHAUER</u>	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>1020 BASIN ST SW</u>	Company NAIC Number:
City <u>EPHRATA, WA</u> State <u>WA</u> ZIP Code <u>98023</u>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>TAX PARCEL 140643001</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>COMMERCIAL</u>	
A5. Latitude/Longitude: Lat. <u>47.310</u> Long. <u>-119.5584</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. <u>NA</u>	
A7. Building Diagram Number <u>1-A</u>	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s) <u>NA</u> sq ft	A9. For a building with an attached garage:
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>NA</u>	a) Square footage of attached garage <u>NA</u> sq ft
c) Total net area of flood openings in A8.b <u>NA</u> sq in	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>NA</u>
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	c) Total net area of flood openings in A9.b <u>NA</u> 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 <u>CITY OF EPHRATA 530051</u>	B2. County Name <u>GRANT</u>	B3. State <u>WA</u>
B4. Map/Panel Number <u>0758</u>	B5. Suffix <u>C</u>	B6. FIRM Index Date <u>FEB 18 2009</u>
B7. FIRM Panel Effective/Revised Date <u>FEB 18 2009</u>	B8. Flood Zone(s) <u>AO</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>1'</u>
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		

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: EPHRATA PID 6605 Vertical Datum: NAVD 88 EL. 1256.497
 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.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>1256.74</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	_____	<input 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>1256.74</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>1254.04</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>1255.64</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
NAh) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	_____	<input 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.

- Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No
- Check here if attachments.

Certifier's Name <u>KNUD STIRLING KNUDSEN</u>	License Number <u>8598</u>
Title <u>PROFESSIONAL LAND SURVEYOR</u>	Company Name <u>KNUDSEN LAND SURVEY LLC</u>
Address <u>PO BOX 505</u>	City <u>EPHRATA</u> State <u>WA</u> ZIP Code <u>98023</u>
Signature <u>R. Knudsen</u>	Date <u>4.28.14</u> Telephone <u>754.4376</u>



ELEVATION CERTIFICATE, page 1

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. 1070 BASIN ST SW			Policy Number:	
City EPHRATA WASH	State WA	ZIP Code 98023	Company NAIC Number:	

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments THE INFORMATION ON PAGE 1 SECTIONS A-B & C RELATE TO THE END OF THE EXISTING BUILDING TO WHICH AN EXTENDED ADDITION HAS BEEN CONSTRUCTED

Signature _____ Date _____

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 8–9 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's or Owner's Authorized Representative's Name R.S. KNUDSEN

Address PO Box 505 City EPHRATA State WA ZIP Code 98023

Signature R. Knudsen Date 4-28-14 Telephone 754-4376

Comments _____

Check here if attachments.

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: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building:	_____ <input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____
G9. BFE or (in Zone AO) depth of flooding at the building site:	_____ <input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____
G10. Community's design flood elevation:	_____ <input type="checkbox"/> feet <input type="checkbox"/> meters	Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

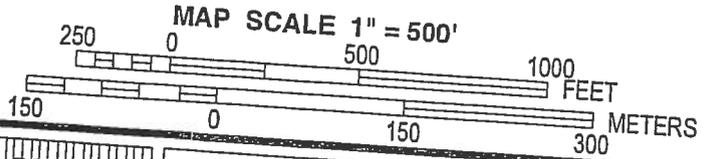
Signature _____ Date _____

Comments _____

Check here if attachments.

For community map revision history prior to countywide mapping, refer to the Community Map History table located in the Flood Insurance Study report for this jurisdiction.

To determine if flood insurance is available in this community, contact your insurance agent or call the National Flood Insurance Program at 1-800-638-6620.



NIP

PANEL 0758C

NATIONAL FLOOD INSURANCE PROGRAM

FIRM
FLOOD INSURANCE RATE MAP
GRANT COUNTY,
WASHINGTON
AND INCORPORATED AREAS

PANEL 758 OF 1950
(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:

COMMUNITY

GRANT COUNTY
EPHRATA, CITY OF

<u>NUMBER</u>	<u>PANEL</u>	<u>SUFFIX</u>
530049	0758	C
530051	0758	C

Notice to User: The Map Number shown below should be used when placing map orders; the Community Number shown above should be used on insurance applications for the subject community.



MAP NUMBER
53025C0758C

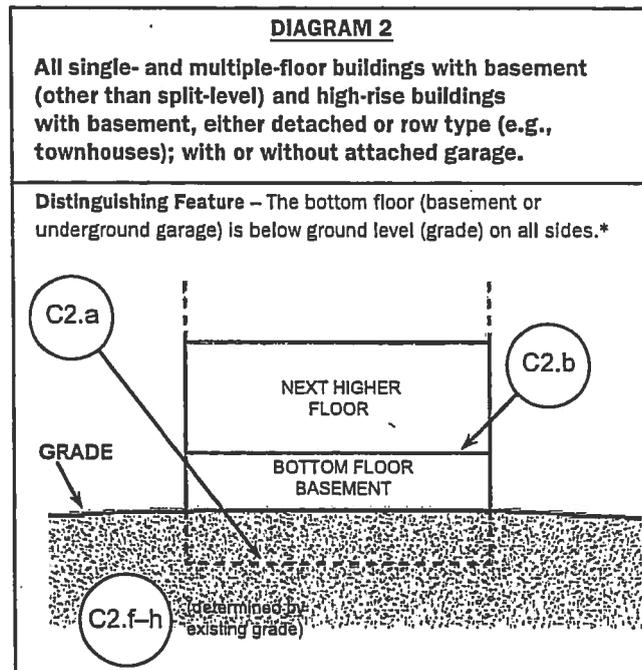
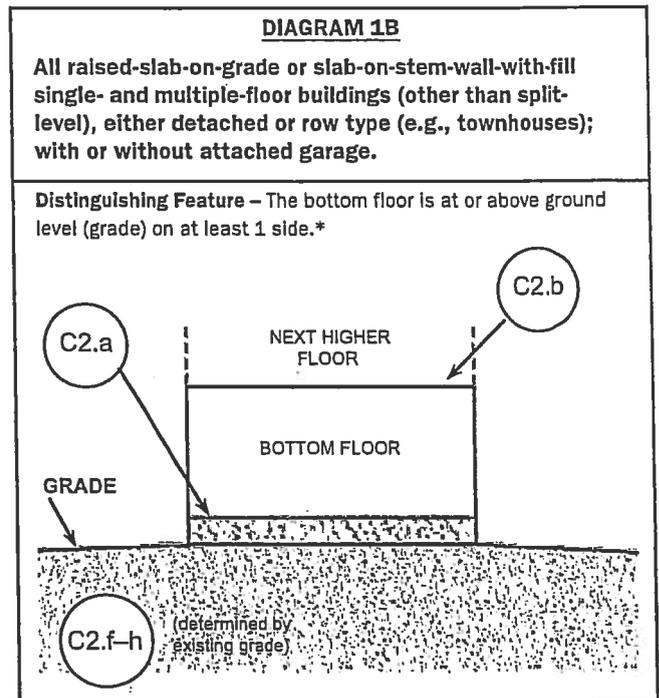
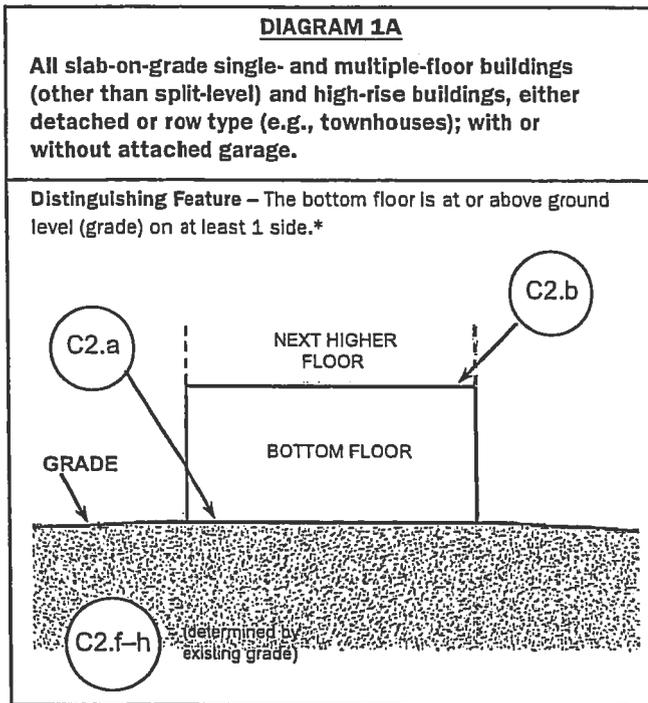
EFFECTIVE DATE
FEBRUARY 18, 2009

Federal Emergency Management Agency

Building Diagrams

The following diagrams illustrate various types of buildings. Compare the features of the building being certified with the features shown in the diagrams and select the diagram most applicable. Enter the diagram number in Item A7, the square footage of crawlspace or enclosure(s) and the area of flood openings in square inches in Items A8.a–c, the square footage of attached garage and the area of flood openings in square inches in Items A9.a–c, and the elevations in Items C2.a–h.

In A zones, the floor elevation is taken at the top finished surface of the floor indicated; in V zones, the floor elevation is taken at the bottom of the lowest horizontal structural member (see drawing in instructions for Section C).



* A floor that is below ground level (grade) on all sides is considered a basement even if the floor is used for living purposes, or as an office, garage, workshop, etc.



GRANT COUNTY WASHINGTON



TAXSIFTER

SIMPLE SEARCH SALES SEARCH REETSIFTER COUNTY HOME PAGE CONTACT DISCLAIMER

Laure Grammer
Grant County Assessor P. O. Box 37 Ephrata, WA 98823

Assessor Treasurer Appraisal MapSifter

Parcel

Parcel#: 140643001 Owner Name: Berschauer Business Center Properties LLC
 DOR Code: 53 - Trade - General Merchandise Address1: 14047 Dodson Rd N
 Situs: 1140 SW BASIN ST Address2:
 Map Number: City, State: Ephrata WA
 Status: Zip: 98823

Description: TAX# 10552 THAT PORTION OF LOTS 5 AND 6, BLOCK I OF REARD'S REPLAT OF A PORTION OF EPHRATA ORCHARD HOMES, IN THE SOUTHEAST QUARTER OF SECTION 16, TOWNSHIP 21 NORTH, RANGE 26 E.W.M., GRANT COUNTY, WASHINGTON, ACCORDING TO THE PLAT THEREOF RECORDED IN ACREAGE PLATS, PAGE 32, RECORDS OF GRANT COUNTY, WASHINGTON, AND THAT PORTION OF LOT 1, BLOCK 10, EPHRATA ORCHARD HOMES, IN THE NORTHEAST QUARTER OF SECTION 21, TOWNSHIP 21 NORTH, RANGE 26 E.W.M., GRANT COUNTY, WASHINGTON, DESCRIBED AS FOLLOWS; BEGINNING AT A FOUND BRASS CAP MONUMENT MARKING THE INTERSECTION OF 11TH AVENUE SOUTHWEST AND STATE ROUTE 28, SAID POINT BEARS NORTH 26°08'39"EAST, 932.79 FEET, FROM A FOUND BRASS CAP MONUMENT MARKING THE INTERSECTION OF 13TH AVENUE SOUTHWEST AND STATE ROUTE 28; THENCE NORTH 26°08'39"EAST, FOLLOWING SAID CENTERLINE OF STATE ROUTE 28, 14.98 FEET; THENCE SOUTH 63°51'21"EAST, 40.00 FEET TO A FOUND HALF INCH REBAR WITH SURVEYOR'S CAP STAMPED "LS 8588" AND THE TRUE POINT OF BEGINNING; THENCE CONTINUING SOUTH 63°51'21"EAST, 160.00 FEET, TO A FOUND HALF INCH REBAR WITH SURVEYOR'S CAP STAMPED "LS 8588"; THENCE NORTH 26°08'39"EAST, 80.00 FEET, TO A FOUND HALF INCH REBAR WITH SURVEYOR'S CAP STAMPED "LS 8588"; THENCE NORTH 58°40'03"EAST, 65.09 FEET, TO A HALF INCH REBAR WITH SURVEYOR'S CAP STAMPED "LS 8588"; THENCE NORTH 26°08'39"EAST, 75.11 FEET, TO A HALF INCH REBAR WITH SURVEYOR'S CAP STAMPED "LS 8588"; THENCE NORTH 63°51'21"WEST, 195.00 FEET; THENCE SOUTH 26°08'39"WEST, 210.00 FEET TO THE TRUE POINT OF BEGINNING. TOGETHER WITH ALL WATER RIGHTS APPURTENANT TO THE PROPERTY DESCRIBED HEREIN.

Comment:

2014 Market Value		2014 Taxable Value		2014 Assessment Data	
Land:	\$188,910	Land:	\$188,910	District:	0112 - 0112
Improvements:	\$265,145	Improvements:	\$265,145	Current Use/DFL:	No
Permanent Crop:	\$0	Permanent Crop:	\$0		
Total	\$454,055	Total	\$454,055	Total Acres:	0.79000

Ownership

Owner's Name	Ownership %
Berschauer Business Center Properties LLC	100 %

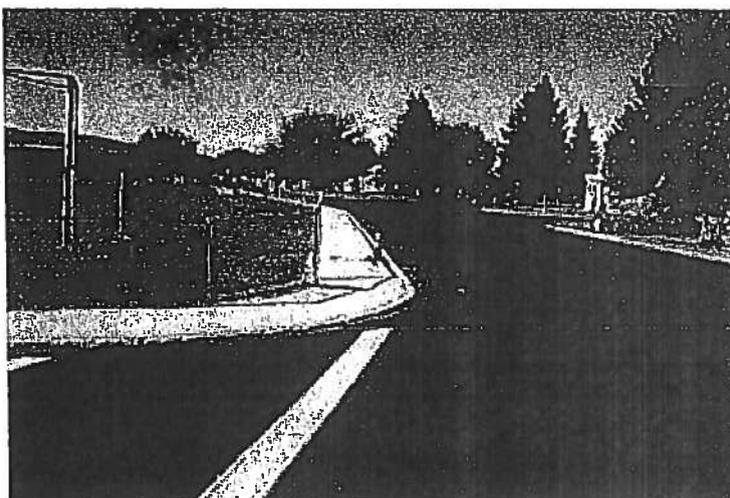
Sales History

Sale Date	Sales Document	# Parcels	Excise #	Grantor	Grantee	Price
11/26/12	1308770	1	212632	Berschauer Business Center Properties LLC		\$0
02/02/12	1295990	2	209830	Berschauer, James D & Marilyn	Berschauer Business Center Properties LLC	\$0
04/29/04	V: 0 Pg 0	1	200417577	BERSCHAUER BUSINESS CEN	BERSCHAUER, JAMES D/MARILYN	\$0
03/01/87	V: 611 Pg 200	1	198710563		BERSCHAUER BUSINESS CENTER	\$1
01/01/01	1308769	1	65-74	Berschauer Business Center Properties LLC		\$0

SURVEY INFORMATION SYSTEM Report of Survey Mark

Designation: EPHRATA	T.R.S: 21N, 26E, 21	ACCOUNTS INFORMATION		
Monument ID: 6605	Corner Code:	BOOK	PROJECT	INVOICE
NGS Pid:	State Route:	35	XL2584	23-06016
State: WASHINGTON	Mile Post:	NA	MT0319	23-11026
County: GRANT	Station:			
Region: NC	Offset:			
Nearest Town: EPHRATA	Owner: GS			
USGS Quad: EPHRATA	Bearing: M			

TO REACH THE STATION FROM THE JUNCTION OF SR 282 AND SR 028 (MP 46.63), IN EPHRATA, GO SOUTHWEST 100 METERS ALONG SR 028 TO THE INTERSECTION WITH 13TH AVE SW. TURN RIGHT AND GO NORTHWEST 100 METERS ALONG 13TH AVE SW TO THE INTERSECTION WITH C ST SW. TURN RIGHT AND GO NORTHEAST 0.2 MILES ALONG C ST SW TO MARK ON LEFT. IT IS LOCATED IN THE SIDEWALK ON THE WESTERLY SIDE OF C ST SW, AND IS 10 METERS NORTHEAST OF 11TH AVE SW, 25.4 METERS @ 205 DEGREES FROM A FIRE HYDRANT, 6.0 METERS @ 265 DEGREES FROM THE APPROXIMATE CENTERLINE OF C ST SW, 15.8 METERS @ 5 DEGREES FROM THE APPROXIMATE CENTERLINE OF 11TH AVE SW AND 1.2 METERS @ 80 DEGREES FROM A 1 METER HIGH CHAIN LINK FENCE.. THE MARK IS A WSDOT BRASS DISK CEMENTED INTO A DRILL HOLE AND SET LEVEL WITH THE CONCRETE SURFACE.



Survey Control

Datum: NAD 83/11		Date: 02/28/2013			
Lat: 47 18 38.603943 N		Long: 119 33 37.814809 W		Ellips: 362.625 (M) 1189.712 (USFt)	Geoid: -20.356 (M)
Washington State Plane Zone: South					
Northing	Easting	Scale	Comb Factor	Conv Angle	
220219.351 (M) 722502.987 (USFt)	571036.947 (M) 1873477.050 (USFt)	0.99999490	0.99993799	0 40 56.8	
Ortho:	Date: 05/18/2006	Survey Info	Accuracy	Network	Method
Datum: NAVD 88		Horizontal	2 CM	PRIMARY	GPS
Elevation: 382.981 (M) <u>1256.497 (USFt)</u>		Ellips	5 CM		GPS
		Ortho	1 CM	PRIMARY	DIFF LEVELS