

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

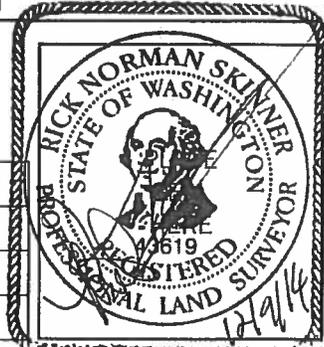
OMB No. 1660-0008
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name MEI-635 LLC		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1305 S.W. Basin Street		Company NAIC Number:
City Ephrata	State WA	ZIP Code 98823
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lots 6-10. Block 1 Daily Addition to Ephrata / Parcel No. 130334000		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Commercial		
A5. Latitude/Longitude: Lat. 47° 18' 26.5356" N Long. 119° 33' 42.5088" W 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 1B		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) _____ sq ft		a) Square footage of attached garage _____ sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____		b) Number of permanent flood openings in the attached garage 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
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		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 Ephrata City of 530051			B2. County Name Grant		B3. State Washington
B4. Map/Panel Number 53025C0766C	B5. Suffix C	B6. FIRM Index Date 02/18/2009	B7. FIRM Panel Effective/Revised Date 02/18/2009	B8. Flood Zone(s) AO	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) (depth 1)
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: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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: <u>DOT MON NO. 6605 ELEV.=1256.497</u> Vertical Datum: <u>NAVD88</u> Indicate elevation datum used for the elevations in Items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> 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>1251 . 5</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>N/A</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>N/A</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>1252 . 0</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>1246 . 8</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>1247 . 0</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>N/A</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.			
<input type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name RICK N. SKINNER		License Number 43619	
Title PROFESSIONAL LAND SURVEYOR		Company Name WESTERN PACIFIC ENGINEERING & SURVEY	
Address 1328 E. HUNTER PLACE		City MOSES LAKE	State WA
Signature <i>[Signature]</i>		ZIP Code 98837	Telephone (509) 765-1023
Date 12/09/2014			



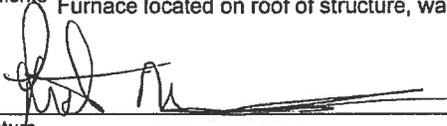
ELEVATION CERTIFICATE, page 2

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. 1305 S.W. Basin Street			Policy Number:
City Ephrata	State WA	ZIP Code 98823	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 Furnace located on roof of structure, water heater placed 6 inches above finished floor.

Signature 

Date 12/09/2014

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 4 . 5 feet meters above or below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is 4 . 7 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 or Owner's Authorized Representative's Name _____

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

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–G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
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- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters Datum _____
- G10. Community's design flood elevation: _____ feet meters Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments _____

Check here if attachments.

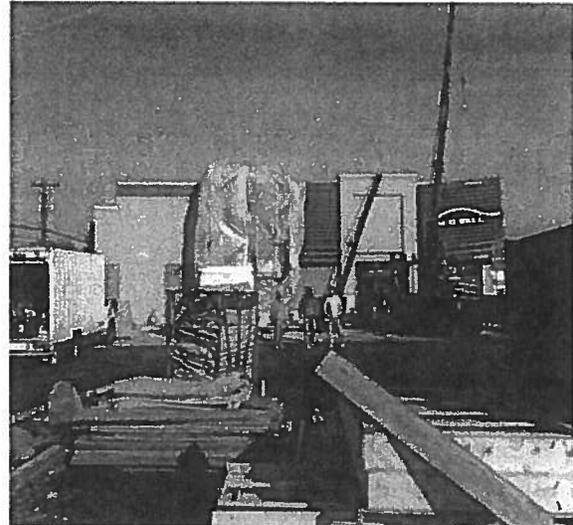
BUILDING PHOTOGRAPHS
See Instructions for Item A6.

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. 1305 S.W. Basin Street			Policy Number:	
City Ephrata	State WA	ZIP Code 98823	Company NAIC Number:	

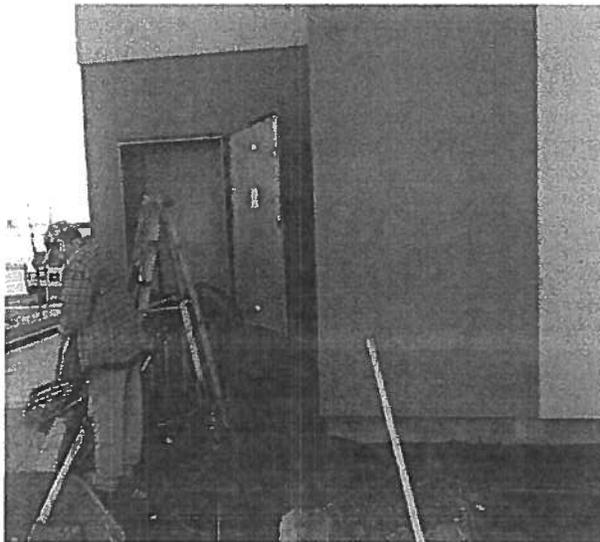
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, 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.



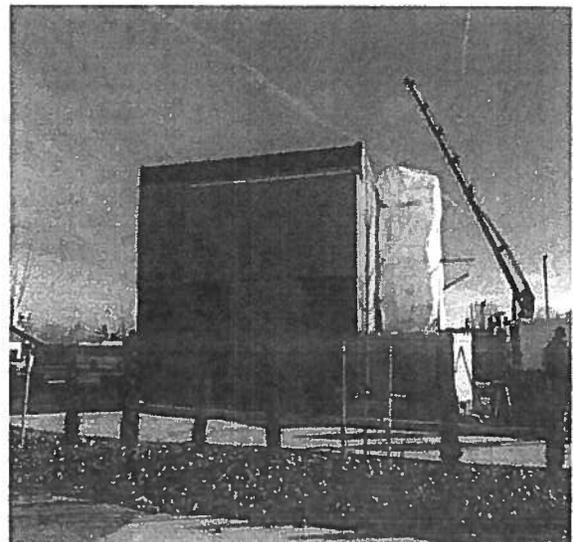
(Front View)



(South Side View)



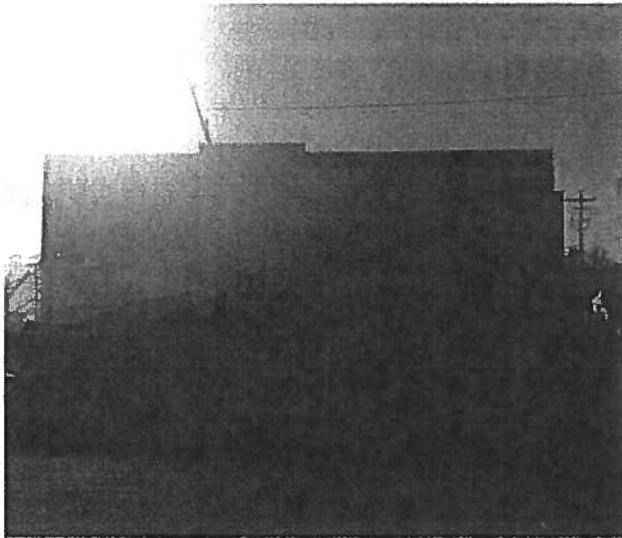
(Rear View Electrical)



(Rear View)

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. 1305 S.W. Basin Street			Policy Number:
City Ephrata	State WA	ZIP Code 98823	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.

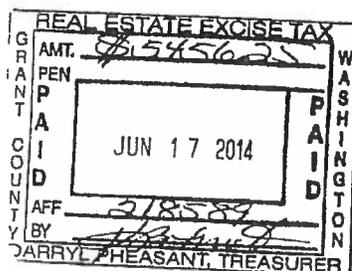


(North Side View)



When recorded return to:

MEI-635, LLC, a Montana Limited Liability Company
320 West Broadway, Suite A
Missoula, MT 59802



STATUTORY WARRANTY DEED

Escrow No.: G-6061
Title Order No.: G-6061

THE GRANTOR(S)

Samuel Israel Foundation, a Washington Non-Profit Corporation

for and in consideration of Ten Dollars and as part of an I.R.C. 1031 tax-deferred exchange in hand paid, conveys, and warrants to

MEI-635, LLC, a Montana Limited Liability Company

the following-described real estate, situated in the County of GRANT, State of Washington:

LOTS 6, 7, 8, 9 AND 10, BLOCK 1, DAILEY ADDITION TO EPHRATA, ACCORDING TO THE PLAT THEREOF RECORDED IN VOLUME 3 OF PLATS, PAGE 57, RECORDS OF GRANT COUNTY, WASHINGTON.

Subject to: See attached Exhibit "A"

Tax Parcel Number(s): 13-0334-000

Dated: JUNE 12, 2014

Samuel Israel Foundation

BY: Eddie Hasson
Eddie Hasson, President

STATE OF WASHINGTON

COUNTY OF KING

I certify that I know or have satisfactory evidence that EDDIE HASSON is the person who appeared before me, and said person acknowledged that he signed this instrument, on oath stated that he was authorized to execute the instrument and acknowledged it to as the PRESIDENT of SAMUEL ISRAEL FOUNDATION to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

IN Witness Whereof I have here unto set my hand, this 12TH day of JUNE, 2014

Margaret Longeway
Notary Public

My Commission Expires: 4/3/17

(SEAL)



EXHIBIT "A"

SUBJECT TO:

1. Any future charges, fees or assessments levied by the municipality of EPHRATA.
2. Covenants, conditions and restrictions in declaration of restrictions, BUT OMITTING ANY COVENANT OR RESTRICTION BASED ON RACE, COLOR, RELIGION, SEX, HANDICAP, FAMILIAL STATUS OR NATIONAL ORIGIN;
Recorded : OCTOBER 26, 1949;
Auditor's File No. : 149985.
3. Right of the public to make necessary slopes for cuts or fills upon said premises in the reasonable original grading of streets, avenues, alleys and roads, as dedicated in the plat.
4. Rights reserved in federal patents or state deeds, reservations, restrictions, land use and zoning laws, plat dedications, and restrictive and protective covenants, easements and rights-of-way of record or in apparent use; and existing or future municipal, county, state or other governmental or quasi-governmental assessments, including LID assessments and utility tap or connection charges, if any.



DAILEY ADDITION

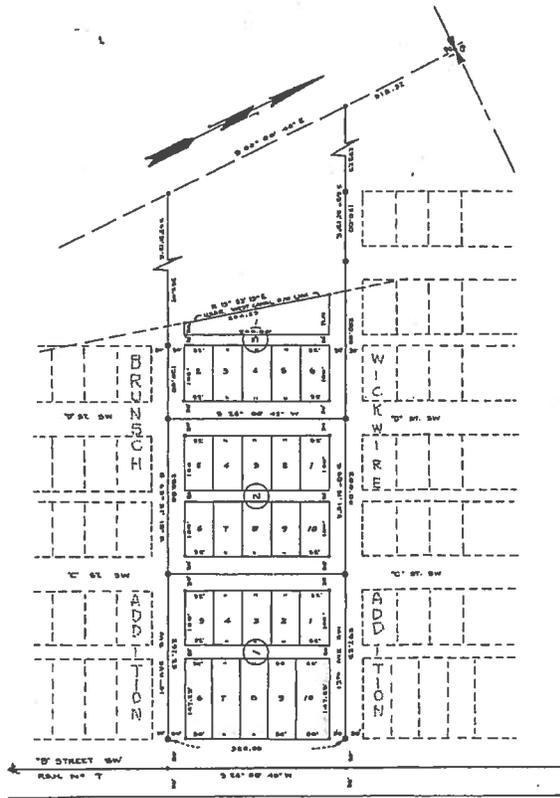
TO

EPHRATA, GRANT COUNTY, WASHINGTON

SCALE: 1" = 100' APRIL 1949

LEGEND

- Denotes concrete monument
- Denotes iron pin



DESCRIPTION

A portion of LOT 5, BLOCK 9, EPHRATA GROUND HOMES, commencing at the 1/4 corner common to Sections 16 and 21 in Township 21 N., Range 26 E.W.M.; proceed thence S 00° 00' 40" E a distance of 512.52 feet, thence S 83° 51' 15" E a distance of 422.79 feet to an intersection with the Eastern R/W line of the U.S.B.R. WEST CANAL, which point is the true point of beginning, thence continuing S 63° 51' 15" E a distance of 803.67 feet to the Westerly 1/2 7/8 line of W Street SW, thence S 83° 02' 42" W a distance of 820.00 feet, thence S 65° 51' 15" W a distance of 743.76 feet, thence N 15° 53' 15" E a distance of 325.19 feet the true point of beginning.

DEDICATION

KNOW ALL MEN BY THESE PRESENTS that the NEVERS LUMBER COMPANY INC., a corporation, the undersigned, in view of the fact that the land herein plotted, here by dedicates this plat and dedicates to the use of the public forever all streets, avenues, places and ways or whatever public property there is shown on plat, and the use thereof for any and all purposes not inconsistent with the use thereof for public highway purposes, also the right to make necessary slopes for cuts and fills upon the lots, blocks, tracts etc., in the reasonable original grading thereof.

IN WITNESS WHEREOF I have hereunto set my hand and affixed the corporate seal of said NEVERS LUMBER COMPANY INC. this 28th day of MAY, A.D. 1949.

Witnesseth: E. D. Nevers
 E. D. NEVERS
 Secretary, Nevers Lumber Company Inc.

ACKNOWLEDGEMENT

STATE OF WASHINGTON
 COUNTY OF GRANT 53

This is to certify that on the 28th day of MAY, A.D. 1949, before me, the undersigned, a Notary Public, personally appeared E. D. NEVERS to me known to be the SECRETARY of the Corporation that executed the within and foregoing instrument and acknowledged the said instrument to be the free and voluntary act and deed of said Corporation for the uses and purposes therein mentioned; and on each stated that he was authorized to execute said instrument and that the seal affixed to the corporate seal of said Corporation. IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year first above written.

[Signature]
 Notary Public in and for the
 State of Washington

CERTIFICATE OF ENGINEER

I HEREBY CERTIFY that the plat of the DAILEY ADDITION is based on an actual survey and subdivision of the above described property and that the distances and corners are shown correctly thereon and the monuments have been set the character and location of which are as stated on the plat, and the lot and block corners staked on the ground.

[Signature]
 JES. K. DOOSON
 Licensed Professional Engineer
 State of Washington



APPROVAL OF CITY OF EPHRATA

EXAMINED and APPROVED this 2nd day of May, A.D., 1949

[Signature]
 Mayor

Attest: [Signature]
 City Clerk

145570

DATE OF FILING

Filed for record at the request of E. D. Nevers this 28th day of May, A.D. 1949 at 4:15 minutes past 11 o'clock AM and recorded in vol. _____ of plats, page _____, records of Grant County

[Signature]
 County Auditor

APPROVAL OF CITY OF EPHRATA PLANNING COUNCIL

EXAMINED and APPROVED this 2nd day of May, A.D., 1949

[Signature]
 Atty's Chairman