



# USPS Tracking®

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Tracking Number: **9410803699300086194091**

Updated Delivery Day: **Friday, January 20, 2017**

## Product & Tracking Information

Greenovation

## Available Actions

Postal Product:  
Priority Mail™

Features:

Signature Confirmation™

Up to \$50 insurance included  
Restrictions Apply

[Proof of Delivery](#)

[Text Updates](#)

[Email Updates](#)

### DATE & TIME

January 20, 2017 , 1:25 pm

### STATUS OF ITEM

Notice Left (PS Authorized  
Recipient Available)

### LOCATION

EDMONDS, WA 98026

We attempted to deliver your item at 1:25 pm on January 20, 2017 in EDMONDS, WA 98026 and a notice was left because an authorized recipient was not available.

|                             |  |                   |
|-----------------------------|--|-------------------|
| January 20, 2017 , 8:44 am  | Out for Delivery                                   | EDMONDS, WA 98026 |
| January 20, 2017 , 8:34 am  | Sorting Complete                                   | EDMONDS, WA 98026 |
| January 20, 2017 , 5:45 am  | Arrived at Post Office                             | EDMONDS, WA 98026 |
| January 20, 2017 , 5:10 am  | Arrived at USPS Facility                           | EDMONDS, WA 98026 |
| January 20, 2017 , 4:01 am  | Departed USPS Facility                             | SEATTLE, WA 98168 |
| January 19, 2017 , 11:10 pm | Arrived at USPS Facility                           | SEATTLE, WA 98168 |
| January 19, 2017 , 11:03 pm | Departed USPS Facility                             | TACOMA, WA 98413  |
| January 19, 2017 , 8:59 pm  | Arrived at USPS Facility                           | TACOMA, WA 98413  |
| January 19, 2017 , 4:57 pm  | Departed Post Office                               | SEABECK, WA 98380 |
| January 19, 2017 , 4:06 pm  | Acceptance   | SEABECK, WA 98380 |
| January 18, 2017            | Pre-Shipment Info Sent to USPS, USPS Awaiting Item |                   |

## Track Another Package

Tracking (or receipt) number

Track It

## Manage Incoming Packages

Track all your packages from a dashboard.  
No tracking numbers necessary.

[Sign up for My USPS](#)



# 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>Greenovation LLC   |                     |                                   |   | Policy Number:            |   |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br>308 South Nenant Street  |                     |                                   |   | Company NAIC Number:      |   |
| City<br>Bucoda  | State<br>Washington | ZIP Code<br>98530                 |   |                           |   |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)<br>TPN 64121700100 - Lots 1 and 2 of the Plat of Mcelroy and Williams, Div. 2, under AFN 003008, Records of Thurston Co., WA   |                     |                                   |   |                           |   |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential (house)</u>   |                     |                                   |   |                           |   |
| A5. Latitude/Longitude: Lat. <u>46°47'48" N</u> Long. <u>122°52'09" W</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>  |                     |                                   |   |                           |   |
| A8. For a building with a crawlspace or enclosure(s):   |                     |                                   |   |                           |   |
| a) Square footage of crawlspace or enclosure(s) <u>1,460</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>1,527</u> sq in  |                     |                                   |   |                           |   |
| d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |                     |                                   |   |                           |   |
| A9. For a building with an attached garage:   |                     |                                   |   |                           |   |
| a) Square footage of attached garage _____ sq ft  |                     |                                   |   |                           |   |
| 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 A9.b _____ 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<br>Town of Bucoda - 530189   |                     |                                   | B2. County Name<br>Thurston                             |                           | B3. State<br>Washington   |
| B4. Map/Panel Number<br>53067C 0486   | B5. Suffix<br>E     | B6. FIRM Index Date<br>10/16/2012 | B7. FIRM Panel Effective/<br>Revised Date<br>10/16/2012 | B8. Flood Zone(s)<br>AE   | B9. Base Flood Elevation(s)<br>(Zone AO, use Base Flood Depth)<br>250.2 |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:<br><input checked="" type="checkbox"/> FIS Profile <input 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>308 South Nenant Street |                     |                   | Policy Number:                   |
| City<br>Bucoda   | State<br>Washington | ZIP Code<br>98530 | 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 \_\_\_\_\_ . \_\_\_\_\_  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 1–2 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.



**ELEVATION CERTIFICATE**

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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>308 South Nenant Street |                     |                   | Policy Number:                   |
| City<br>Bucoda   | State<br>Washington | ZIP Code<br>98530 | 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 Front view



Photo Two

Photo Two Caption Right view

**ELEVATION CERTIFICATE**

**BUILDING PHOTOGRAPHS**

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>308 South Nenant Street |                     |                   | Policy Number:                   |
| City<br>Bucoda   | State<br>Washington | ZIP Code<br>98530 | 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 One

Photo One Caption Rear view

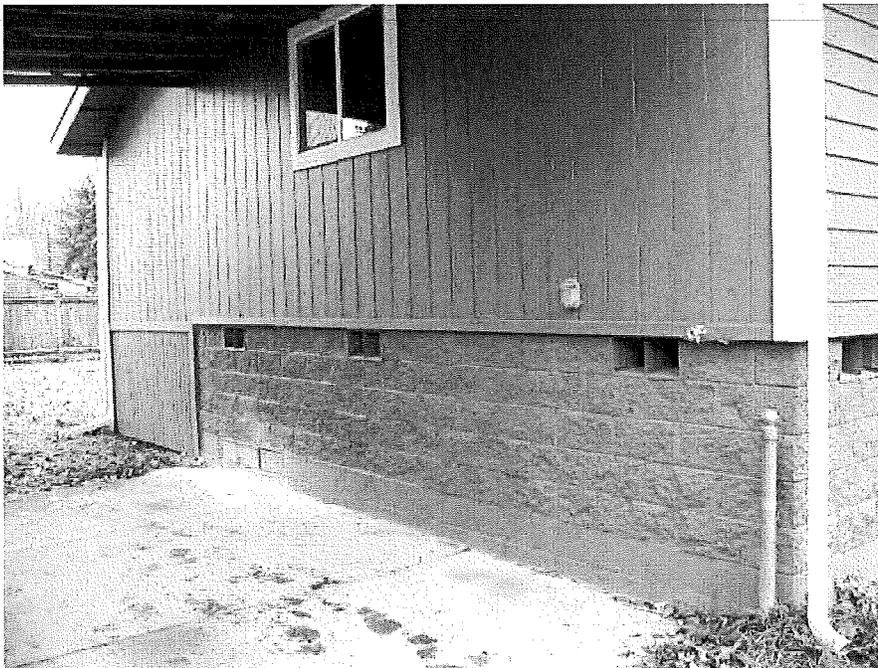


Photo Two

Photo Two Caption Left view