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

OMB Control No. 1660-0008 Expiration Date: 06/30/2026

#### **ELEVATION CERTIFICATE**

#### **IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11**

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: Jackson Freedom Farms LLC	Policy Number:
A2.	Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Koute and Box	Company NAIC Number:
	4701 N. Porter Avenue	
City	State: OK	ZIP Code:73071
	Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Num Part of the NW/4 Section 8, T. 9 N., R. 2 W., I.M.	nber:
A4.	Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.):Accessory-We	st
A5.	Latitude/Longitude: Lat. 35°16'29.24"N Long. 97°26'15.12"W Horiz. Datum:	NAD 1927
A6.	Attach at least two and when possible four clear color photographs (one for each side) of the bu	uilding (see Form pages 7 and 8).
A7.	Building Diagram Number: 1A	
A8.	For a building with a crawlspace or enclosure(s):	
	a) Square footage of crawlspace or enclosure(s): sq. ft.	
	b) Is there at least one permanent flood opening on two different sides of each enclosed area?	☐Yes ☐No ØN/A
	c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot Non-engineered flood openings:0 Engineered flood openings:0	above adjacent grade:
	d) Total net open area of non-engineered flood openings in A8.c: 0.00 sq. in.	
	e) Total rated area of engineered flood openings in A8.c (attach documentation - see Instruction	ons): sq. ft.
	f) Sum of A8.d and A8.e rated area (if applicable – see Instructions):sq. ft.	
A9.	For a building with an attached garage:	
	a) Square footage of attached garage: sq. ft.	
	b) Is there at least one permanent flood opening on two different sides of the attached garage?	Yes ONo ⊠N/A
	c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent Non-engineered flood openings:0 Engineered flood openings:0	acent grade:
	d) Total net open area of non-engineered flood openings in A9.c: sq. in.	
	e) Total rated area of engineered flood openings in A9.c (attach documentation - see Instruction	ons): 0.00 sq. ft.
	f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): sq. ft.	
	SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFO	RMATION
В1.	a. NFIP Community Name: City of Norman B1.b. NFIP Con	nmunity Identification Number: 400046
B2.	County Name: Cleveland B3. State: OK B4. Map/Panel No.:	40027C0190 B5. Suffix:J
B6.	FIRM Index Date: B7. FIRM Panel Effective/Revised Date:02/20/2	2013
B8.	Flood Zone(s): AE and A B9. Base Flood Elevation(s) (BFE) (Zone AO, use	Base Flood Depth): 1106.00
B10	D. Indicate the source of the BFE data or Base Flood Depth entered in Item B9:  OFIS DEFINATION OF Determined Of Depth entered in Item B9:	
B11	1. Indicate elevation datum used for BFE in Item B9:	/Source:
B12	<ol> <li>Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Prote Designation</li> </ol>	ected Area (OPA)?
B13	3. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? DYes 🖔	3No

#### **ELEVATION CERTIFICATE**

		runai e e e e e	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. F 4701 N. Porter Avenue	Route and Box No.:	FOR INSURAN	CE COMPANY USE
	le: 73071	Policy Number:	
City: Norman State: OK ZIP Cod	le:	Company NAIC	Number:
SECTION C - BUILDING ELEVATION INFOR	MATION (SURVEY	REQUIRED)	
C1. Building elevations are based on: Construction Drawings* DBuil *A new Elevation Certificate will be required when construction of the building	ding Under Construction	on* <b>⊠</b> Finished (	Construction
C2. Elevations – Zones A1–A30, AE, AH, AO, A (with BFE), VE, V1–V30, V (vith A99. Complete Items C2.a–h below according to the Building Diagram sp. Benchmark Utilized: Norman GPS 366 Vertical C	ecified in Item A7. In F		
Indicate elevation datum used for the elevations in items a) through h) below.  □NGVD 1929 □NAVD 1988 □Other:			
Datum used for building elevations must be the same as that used for the BFE If Yes, describe the source of the conversion factor in the Section D Comment	i. Conversion factor us s area.		<b>⊠</b> No e measurement used:
<ul> <li>a) Top of bottom floor (including basement, crawlspace, or enclosure floor)</li> </ul>	or): 1106.		O meters
b) Top of the next higher floor (see Instructions):	2		O meters
c) Bottom of the lowest horizontal structural member (see Instructions):		<b>1</b> feet	meters
d) Attached garage (top of slab):	-	🖸 feet	O meters
<ul> <li>e) Lowest elevation of Machinery and Equipment (M&amp;E) servicing the bu (describe type of M&amp;E and location in Section D Comments area):</li> </ul>	ilding N/A	• feet	O meters
f) Lowest Adjacent Grade (LAG) next to building:   Natural  Finis	hed1105	.3 🔯 feet	O meters
g) Highest Adjacent Grade (HAG) next to building:   Natural Finis	hed 1108	.92 🗖 feet	O meters
<ul> <li>h) Finished LAG at lowest elevation of attached deck or stairs, including support:</li> </ul>	structural N/A	<b>G</b> feet	O meters
SECTION D - SURVEYOR, ENGINEER, OR	ARCHITECT CERT	TFICATION	
This certification is to be signed and sealed by a land surveyor, engineer, or a I certify that the information on this Certificate represents my best efforts to int statement may be punishable by fine or imprisonment under 18 U.S. Code, Se	erpret the data availab	state law to certify lie. I understand the	elevation information. at any false
Were latitude and longitude in Section A provided by a licensed land surveyor	? <b>⊠</b> Yes <b>□</b> No		ı
☐ Check here if attachments and describe in the Comments area.			1.1
Certifier's Name: Randall Mansfield License Number	<sub>er:</sub> 1613		SSFORA FEE
Title: Land Surveyor		utility 201.	TEAR
Company Name: Cowan Group Engineering		- Barla	AND SE
Address:7100 N Classen Boulevard, Suite 500		- STE	NSFIELD R
City: Oklahoma City State: OK Z	IP Code: 73116	- Edin	1613 STAN
Telephone: 405-463-3369 Ext.: Email: _rmansfield@cc	owangroup.co	- MATHER	LAHOMA
	Date: 6/4/2025		Zajinine -
Copy all pages of this Elevation Certificate and all attachments for (1) communowner.		ce agent/company	, and (3) building
Comments (including source of conversion factor in C2; type of equipment an	d location per C2.e; ar	nd description of an	y attachments):

#### **ELEVATION CERTIFICATE**

	IMI OKIANI. MOOTI K	<u> </u>	TITE MO	11001101	to oit ii	101110011011	TAGEO I-TT	
	ng Street Address (including Apt., Unit, Suite 701 N Porter Avenue	, and/or	Bldg. No	.) or P.O. F	toute and	d Box No.:	FOR INSURA	NCE COMPANY USE
2)	Norman	State:	OK	ZIP Cod	le: 73	071	Policy Number	
		S 8					Company NAIC	Number:
	SECTION E – BUILDING F FOR ZONE A							ED)
intend	ones AO, AR/AO, and A (without BFE), comp led to support a Letter of Map Change reque meters.							
	ng measurements are based on: Constr w Elevation Certificate will be required when		-		-		*	Construction
	Provide measurements (C.2.a in applicable B neasurement is above or below the natural H				wing and	d check the ap	propriate boxes	to show whether the
а	) Top of bottom floor (including basement, crawlspace, or enclosure) is:				C feet	O meters	Dabove or	☐below the HAG.
b	) Top of bottom floor (including basement, crawlspace, or enclosure) is:		2 <u></u>		☐ feet	O meters	☐above or	☐below the LAG.
	or Building Diagrams 6–9 with permanent floext higher floor (C2.b in applicable	od oper	nings prov	vided in Se	ction A It	ems 8 and/or	9 (see pages 1-	2 of Instructions), the
	ng Diagram) of the building is:		,		☐ feet	neters	☐above or	Delow the HAG.
	attached garage (top of slab) is:		3		C feet	meters	Cabove or	☐below the HAG.
	op of platform of machinery and/or equipment ervicing the building is:	nt			🗅 feet	O meters	☐above or	Delow the HAG.
	one AO only: If no flood depth number is ava oodplain management ordinance?   ☐ Yes			of the botto Inknown				e community's ormation in Section G.
	SECTION F - PROPERTY OWNER	(OR C	WNER'	S AUTHO	RIZED	REPRESEN	TATIVE) CERT	TFICATION
	roperty owner or owner's authorized represe ere. The statements in Sections A, B, and E						ne A (without BF	E) or Zone AO must
□Che	eck here if attachments and describe in the C	ommen	its area.					
Prope	rty Owner or Owner's Authorized Represent	ative Na	ime:					
Addre	ss:		_					
City:						State:	ZIP Code:	
Telepi	hone: Ext.:	_, Ema	il: <sub>;2</sub>					
					Date:		_	
Comn	nents:							
								₽
						3.		

#### **ELEVATION CERTIFICATE**

	g Street Address (in		Unit, Suite, and/or	Bldg. No	.) or P.O. Rou	ıte and B	ox No.:	FOR INS	URANCE COMPANY USE
	1 N Porter Avenu	е						Policy Nu	nber:
City:	Norman		State:	_OK	ZIP Code:	7307	71	Company	NAIC Number:
	SECTION G - C	OMMUNITY	INFORMATION	(RECO	MMENDED	FOR CO	OMMUNI	TY OFFICIA	AL COMPLETION)
	cal official who is au n A, B, C, E, G, or F								dinance can complete
G1.		hitect who is a	authorized by state						a licensed surveyor, se and date of the elevation
G2.a.	A local official completed for a	ompleted Sec building locat	tion E for a building ed in Zone AO.	located	in Zone A (wit	thout a B	FE), Zone	e AO, or Zone	AR/AO, or when item E5 is
G2.b.	☐A local official co	ompleted Sec	tion H for insurance	e purpose	es.	(			
G3.	☐In the Comment	s area of Sec	tion G, the local off	icial desc	ribes specific	correction	ons to the	information in	Sections A, B, E and H.
G4.	☐The following int	formation (Ite	ms G5–G11) is pro	vided for	community flo	oodplain	managen	ent purposes	<b>.</b>
G5.	Permit Number:		G	6. Date F	Permit Issued:			<del></del>	
G7.	Date Certificate of	Compliance/	Occupancy Issued:	( <u> </u>					
G8.	This permit has be	en issued for	: New Constru	ction [	Substantial I	mproven	nent		
G9.a.	Elevation of as-building:	ilt lowest floor	(including baseme	nt) of the			□feet	O <sub>meters</sub>	Datum:
G9.b.	Elevation of botton member:	n of as-built lo	owest horizontal str	uctural			□feet	O <sub>meters</sub>	Datum:
G10.a.	BFE (or depth in Z	one AO) of flo	ooding at the buildir	ng site:	-		□feet	O <sub>meters</sub>	Datum:
G10.b.	Community's minir requirement for the member:		n (or depth in Zone or lowest horizonta		al				
G11.	Variance issued?	OYes C	O <sub>No</sub> If yes, attac	ch docum	nentation and	describe	☐feet in the Co	O <sub>meters</sub> mments area	Datum:
	cal official who prov t to the best of my k								ion G and certify that it is a of this section.
Local (	Official's Name:				т	itle:			
Teleph									
Addres	ss:								
									>ode:
					Da	ite:		1	
	ents (including type ns A, B, D, E, or H):		t and location, per	C2.e; des	scription of an	y attachr	nents; and	d corrections	to specific information in
		#i							

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11

Building Street Address (					
	including Apt., Unit, Suite	e, and/or Bldg. No.) or P.	O. Route and Box No.;	FOR IN	SURANCE COMPANY USE
					umber:
City:		_ State: ZIP	Code:	Compan	y NAIC Number:
SEC		'S FIRST FLOOR HEI REQUIRED) (FOR INS			ZONES
The property owner, own to determine the building nearest tenth of a foot (nunstructions) and the ap	's first floor height for ins earest tenth of a meter ir	urance purposes. Sectior n Puerto Rico). <i>Referenc</i> e	ns A, B, and I must also e <i>the Foundation Type</i>	be completed Diagrams (a	at the end of Section H
H1. Provide the height of	f the top of the floor (as i	ndicated in Foundation T	ype Diagrams) above th	ne Lowest Adj	jacent Grade (LAG):
a) For Building Dia floor (include above-crawlspaces or enck	grade floors only for buil	i–8. Top of bottom Idings with	Ofeet	O <sub>meters</sub>	D <sub>above the IAG</sub>
	grams 2A, 2B, 4, and 6 floor above basement, o		Ofeet	O <sub>meters</sub>	Dahove the I AG
		e building (as listed in Iter grams at end of Section			ve the floor indicated by the illding Diagram?
SECTION I -	PROPERTY OWNER	R (OR OWNER'S AUT	HORIZED REPRESE	NTATIVE)	CERTIFICATION
The property owner or ov A, B, and H are correct to indicate in Item G2.b and	the best of my knowled				The statements in Sections d Section H, they should
Ocheck here if attachme	ents are provided (includ	!			
		ing required photos) and	describe each attachme	ent in the Cor	nments area.
Property Owner or Owne			describe each attachme		
Property Owner or Owne Address:					
Address:	r's Authorized Represen				
Address:	r's Authorized Represen	tative Name:	State:	ZIP	
Address:	r's Authorized Represen	tative Name:	State:	ZIP	
Address:	r's Authorized Represen	tative Name:	State:	ZIP	
Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP	
Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP	
Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP	
Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP	
Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP	
Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP	
Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP	
Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP	
Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP	
Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP	
Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP	

#### **ELEVATION CERTIFICATE**

### IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11

#### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Sui	te, and/or Bldg. No	o.) or P.O. Route and Box No.;	FOR INSURANCE COMPANY USE
City: Norman	State: OK	<b>ZIP Code</b> : <u>73071</u>	Policy Number:

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

#### Photo One



Photo One Caption: North Side Clear Photo One

#### Photo Two



Photo Two Caption:

North Side and West Side

Clear Photo Two

# ELEVATION CERTIFICATE IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11 BUILDING PHOTOGRAPHS

Continuation Page

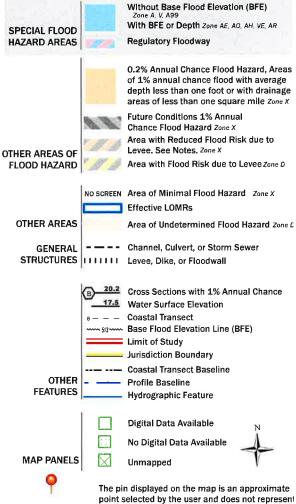
	Oonandadon rag		
Building Street Address (including Apt., Unit 4701 N Porter Avenue	it, Suite, and/or Bldg. No.) or P.O. R	oute and Box No.:	FOR INSURANCE COMPANY USE
			Policy Number:
City: Norman	State: OK ZIP Cod	e: 73071	Company NAIC Number:
Insert the third and fourth photographs belo or "Left Side View." When flood openings a as indicated in Sections A8 and A9.	re present, include at least one clos	date taken and "Fron e-up photograph of re	t View," "Rear View," "Right Side View," epresentative flood openings or vents,
	Photo Three		
Photo Three Caption: East Side			Clear Photo Three
	Photo Four		
			5
Photo Four Caption:			Clear Photo Four

### National Flood Hazard Layer FIRMette



#### Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

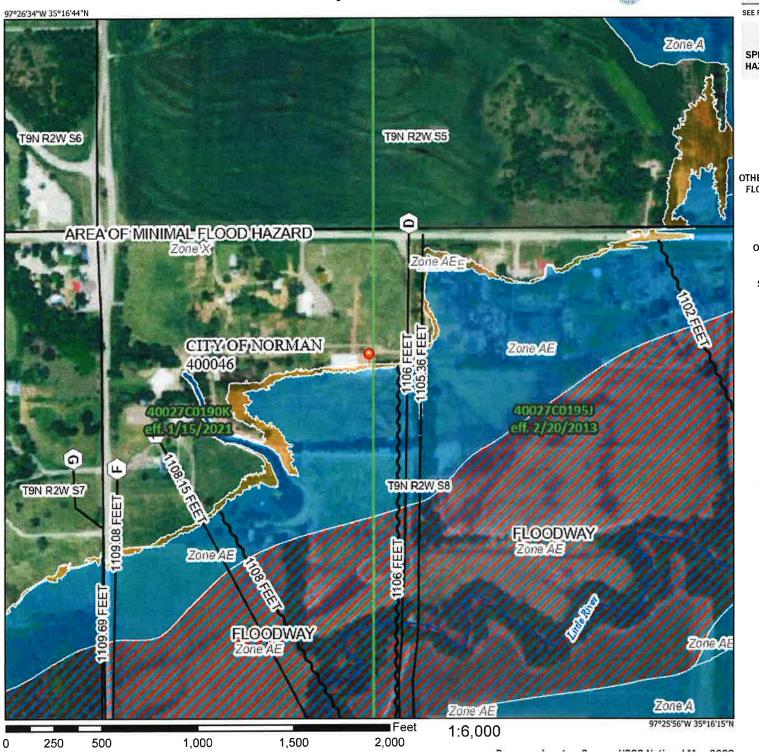


This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

an authoritative property location.

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 5/29/2025 at 8:28 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.



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

OMB Control No. 1660-0008 Expiration Date: 06/30/2026

### ELEVATION CERTIFICATE IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11

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:Jackson Freedom Farms LLC	Policy Number:
Az. Building Street Address (including Apt., Unit, Suite, and/or Bigg. No.) or אום. אום אום אום אום אום אום י	Company NAIC Number:
4701 N. Porter Avenue	
City: Norman State: OK	ZIP Code:73071
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Num- Part of the NW/4 Section 8, T. 9 N., R. 2 W., I.M.	ber:
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): Accessory-So	uth
A5. Latitude/Longitude: Lat. 35°16'12.55"N Long. 97°26'13.02"W Horiz. Datum:	NAD 1927
A6. Attach at least two and when possible four clear color photographs (one for each side) of the bu	uilding (see Form pages 7 and 8).
A7. Building Diagram Number: 1A	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s): 0.00 sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area?	☐Yes ☐No ØN/A
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot Non-engineered flood openings:0 Engineered flood openings:0	
d) Total net open area of non-engineered flood openings in A8.c:0.00_ sq. in.	
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instruction	ons): 0.00 sq. ft.
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions):sq. ft.	
A9. For a building with an attached garage:	
a) Square footage of attached garage: sq. ft.	
b) Is there at least one permanent flood opening on two different sides of the attached garage?	OYes ONo ØN/A
<ul> <li>c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjation Non-engineered flood openings:</li> <li>0</li> <li>Engineered flood openings:</li> </ul>	
d) Total net open area of non-engineered flood openings in A9.c:0.00sq. in.	
e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instruction	ons):sq. ft.
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): sq. ft.	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFO	RMATION
B1.a. NFIP Community Name: City of Norman B1.b. NFIP Com	nmunity Identification Number: 400046
B2. County Name: Cleveland B3. State: OK B4. Map/Panel No.:	40027C0195 B5. Suffix:J
B6. FIRM Index Date: B7. FIRM Panel Effective/Revised Date:02/20/2	2013
B8. Flood Zone(s): AE and A B9. Base Flood Elevation(s) (BFE) (Zone AO, use	Base Flood Depth):1105.36
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9:  OFIS DFIRM OCOMMUNITY Determined Other:	
B11. Indicate elevation datum used for BFE in Item B9: CNGVD 1929 CNAVD 1988 COther	/Source:
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Prote Designation	ected Area (OPA)?
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)?	No

#### **ELEVATION CERTIFICATE**

	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 4701 N. Porter Avenue	
City: Norman State: OK ZiP Code: 73071	Policy Number:
State. On 24 Gode. 170011	Company NAIC Number:
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY	REQUIRED)
C1. Building elevations are based on:   Construction Drawings*   Building Under Construct *A new Elevation Certificate will be required when construction of the building is complete.	ion* ☑Finished Construction
C2. Elevations – Zones A1–A30, AE, AH, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7. In Benchmark Utilized: Norman GPS 366 Vertical Datum: NAVD 88	Puerto Rico only, enter meters.
Indicate elevation datum used for the elevations in items a) through h) below.  CNGVD 1929  NAVD 1988  Other:	
Datum used for building elevations must be the same as that used for the BFE. Conversion factor ulif Yes, describe the source of the conversion factor in the Section D Comments area.	sed?
a) Top of bottom floor (including basement, crawlspace, or enclosure floor): 1106	
b) Top of the next higher floor (see Instructions):	
c) Bottom of the lowest horizontal structural member (see Instructions):	O feet O meters
d) Attached garage (top of slab):	
e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area):  N/A	
f) Lowest Adjacent Grade (LAG) next to building:  Natural Finished 1104	
g) Highest Adjacent Grade (HAG) next to building:   Natural   Finished   110	06.00 <b>S</b> feet <b>D</b> meters
h) Finished LAG at lowest elevation of attached deck or stairs, including structural support:  N/A	O feet O meters
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CER	TIFICATION
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by I certify that the information on this Certificate represents my best efforts to interpret the data availa statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.	state law to certify elevation information. ble. I understand that any false
Were latitude and longitude in Section A provided by a licensed land surveyor?	
Check here if attachments and describe in the Comments area.	
Certifier's Name: Randall Mansfield License Number: 1613	Place Seal Here
Title: _Land Surveyor	- IIII ROFESSIONAL
Company Name: Cowan Group Engineering	RANDACK
Address:7100 N Classen Boulevard, Suite 500	MANSFIELD R
City: Oklahoma City State: OK ZIP Code: 73116	— 1613 S
Telephone: 405-463-3369 Ext.: Email: rmansfield@cowangroup.co	- PER OKLAHOMA WILLIAM
Date: 6/4/2025	The committee
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insura	nce agent/company, and (3) building
owner.  Comments (including source of conversion factor in C2; type of equipment and location per C2.e; a	and description of any attachments):

#### **ELEVATION CERTIFICATE**

	or roccom the lite:	NOOTHORN ON III			
Building Street Address (including Apt., Unit, 4701 N Porter Avenue	Suite, and/or Bldg. No.)	or P.O. Route and	d Box No.:	FOR INSURA	NCE COMPANY USE
				Policy Number:	
City: Norman	State: OK	ZIP Code:73	071	Company NAIC	Number:
SECTION E – BUILDI FOR ZON	NG MEASUREMENT NE AO, ZONE AR/AC		•		D)
For Zones AO, AR/AO, and A (without BFE), intended to support a Letter of Map Change renter meters.					
Building measurements are based on: Co *A new Elevation Certificate will be required to				* <b>G</b> Finished	Construction
E1. Provide measurements (C.2.a in applica measurement is above or below the nature		or the following and	d check the ap	propriate boxes	to show whether the
<ul> <li>a) Top of bottom floor (including baseme crawlspace, or enclosure) is:</li> </ul>	ent,	• feet	O meters	□above or	below the HAG.
<ul> <li>b) Top of bottom floor (including baseme crawlspace, or enclosure) is:</li> </ul>	ent, 		O meters	<b>□</b> above or	Delow the LAG.
E2. For Building Diagrams 6–9 with permane	ent flood openings provi	ded in Section A It	ems 8 and/or	9 (see pages 1-	2 of Instructions), the
next higher floor (C2.b in applicable Building Diagram) of the building is:	-	• feet	meters	□above or	Delow the HAG.
E3. Attached garage (top of slab) is:	,	O feet	O meters	☐above or	Delow the HAG.
E4. Top of platform of machinery and/or equ servicing the building is:	ipment 	🗖 feet	O meters	<b>□</b> above or	Delow the HAG.
E5. Zone AO only: If no flood depth number floodplain management ordinance?					e community's ormation in Section G.
SECTION F - PROPERTY OW	NER (OR OWNER'S	AUTHORIZED	REPRESEN	TATIVE) CERT	TIFICATION
The property owner or owner's authorized resign here. The statements in Sections A, B, a				ne A (without BF	E) or Zone AO must
Check here if attachments and describe in	the Comments area.				
Property Owner or Owner's Authorized Repre	esentative Name:				
Address:					
City:			State:	ZIP Code:	
Telephone: Ext.:	Email:				
	<i>E</i>	Date:			
Comments:					

#### **ELEVATION CERTIFICATE**

	INIT OKTANT. MOOT I	OLLOW THE INC	TROOTIONS ON IN	311100110	N AGEO 1		
Buildir 470	ng Street Address (including Apt., Unit, Suit 1 N Porter Avenue	te, and/or Bldg. No	o.) or P.O. Route and	Box No.:	FOR INS	URANCE CO	OMPANY USE
-	Norman	State: OK	<b>ZIP Code</b> :730	)71	Policy Nu	nber: NAIC Numbe	
	SECTION G - COMMUNITY INFOR	MATION (PECO	MMENDED FOR	CHARTINI			
	cal official who is authorized by law or ordin A, B, C, E, G, or H of this Elevation Certi					dinance can	complete
G1.	The information in Section C was taken Dengineer, or architect who is authorized data in the Comments area below.)						
G2.a.	A local official completed Section E for completed for a building located in Zon		in Zone A (without a	BFE), Zone	AO, or Zone	AR/AO, or v	vhen item E5 is
G2.b.	☐A local official completed Section H for	insurance purpos	es.				
G3.	☐In the Comments area of Section G, the	e local official desc	cribes specific correct	tions to the	information in	Sections A,	B, E and H.
G4.	☐The following information (Items G5–G	11) is provided for	community floodplair	n managem	ent purposes		
<b>G</b> 5.	Permit Number:	G6. Date F	Permit Issued:				
G7.	Date Certificate of Compliance/Occupant	cy Issued:					
G8.	This permit has been issued for:    Nev	v Construction	Substantial Improve	ment			
G9.a.	Elevation of as-built lowest floor (including building:	g basement) of the	·	_ <b>©</b> feet	Ometers	Datum: _	
G9.b.	Elevation of bottom of as-built lowest hor member:	izontal structural		_ Cleet	Ometers	Datum:	.s
G10.a	BFE (or depth in Zone AO) of flooding at	the building site:		☐feet	O <sub>meters</sub>	Datum:	
G10.b	Community's minimum elevation (or dept requirement for the lowest floor or lowest member:		ral				
044	Madanas insuado		S	Gfeet	O <sub>meters</sub>	Datum:	
G11.	Variance issued? ☐Yes ☐No If	yes, attach docun	nentation and describ	e in the Co	mments area	-	
	cal official who provides information in Sec t to the best of my knowledge. If applicable						
Local	Official's Name:		Title:				
NFIP (	Community Name:						
Teleph							
Addres	ss:						
City:				State:	ZIP (	Code:	
			Date:				
	ents (including type of equipment and locans A, B, D, E, or H):	ation, per C2.e; de	scription of any attact	hments; and	d corrections	to specific in	formation in

#### **ELEVATION CERTIFICATE**

Building Street Address (inclu	ıding Apt., Unit, Suite,	and/or Bldg. No.) o	or P.O. Route and Box No.:	FOR IN	SURANCE COMPANY USE
City:		State:	ZIP Code:		umber:y NAIC Number:
SECTION			HEIGHT INFORMATION		ZONES
The property owner, owner's to determine the building's fin nearest tenth of a foot (neare Instructions) and the appropriate tenth of the approximation of t	st floor height for insur st tenth of a meter in I	rance purposes. Se Puerto Rico). <i>Refer</i>	ections A, B, and I must also rence the Foundation Typ	be complete e <i>Diagrams (</i>	d. Enter heights to the at the end of Section H
H1. Provide the height of the	top of the floor (as in	dicated in Foundati	on Type Diagrams) above	the Lowest Ad	jacent Grade (LAG):
a) For Building Diagra     floor (include above-grad     crawlspaces or enclosur	de floors only for build		<b>O</b> feet	Ometers	C <sub>above the I</sub> AG
<ul> <li>b) For Building Diagra higher floor (i.e., the floo enclosure floor) is:</li> </ul>			Ofeet	Ometers	Dahove the I AG
H2. Is all Machinery and Equ H2 arrow (shown in the I Yes ONO			n Item H2 instructions) elev tion H instructions) for the a		
SECTION I - PR	OPERTY OWNER	(OR OWNER'S A	AUTHORIZED REPRES	ENTATIVE)	CERTIFICATION
The property owner or owner A, B, and H are correct to the indicate in Item G2.b and sign	best of my knowledg				
A, B, and H are correct to the	best of my knowledgen Section G. are provided (includin	e. Note: If the local	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal Check here if attachments	best of my knowledgen Section G. are provided (includin	e. Note: If the local	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal of the indicate in Ite	best of my knowledgen Section G. are provided (includin	e. Note: If the local ag required photos)	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal of the indicate in Ite	best of my knowledgen Section G. are provided (includin authorized Representa	e. Note: If the local ag required photos)	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal of the indicate in Ite	best of my knowledgen Section G. are provided (includin authorized Representa	e. Note: If the local ag required photos)	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal of the indicate in Ite	best of my knowledgen Section G. are provided (includin authorized Representa	e. Note: If the local ag required photos)	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal of the indicate in Ite	best of my knowledgen Section G. are provided (includin authorized Representa	e. Note: If the local ag required photos)	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal of the indicate in Ite	best of my knowledgen Section G. are provided (includin authorized Representa	e. Note: If the local ag required photos)	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal of the indicate in Ite	best of my knowledgen Section G. are provided (includin authorized Representa	e. Note: If the local ag required photos)	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal of the indicate in Ite	best of my knowledgen Section G. are provided (includin authorized Representa	e. Note: If the local ag required photos)	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal of the indicate in Ite	best of my knowledgen Section G. are provided (includin authorized Representa	e. Note: If the local ag required photos)	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal of the indicate in Ite	best of my knowledgen Section G. are provided (includin authorized Representa	e. Note: If the local ag required photos)	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal of the indicate in Ite	best of my knowledgen Section G. are provided (includin authorized Representa	e. Note: If the local ag required photos)	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal of the indicate in Ite	best of my knowledgen Section G. are provided (includin authorized Representa	e. Note: If the local ag required photos)	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal of the indicate in Ite	best of my knowledgen Section G. are provided (includin authorized Representa	e. Note: If the local ag required photos)	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.
A, B, and H are correct to the indicate in Item G2.b and signal of the indicate in Ite	best of my knowledgen Section G. are provided (includin authorized Representa	e. Note: If the local ag required photos)	floodplain management of and describe each attachm	ficial complete	d Section H, they should mments area.

#### **ELEVATION CERTIFICATE**

## IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11 BUILDING PHOTOGRAPHS

See Instructions for Item A6.

Buildia	ng Street Address (including Apt., U	FOR INSURANCE COMPANY USE		
47 City:	701 N. Porter Avenue  Norman	State: OK	<b>ZiP Code</b> : _73071	Policy Number:  Company NAIC Number:

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

#### Photo One



Photo One Caption:

Front View and South Side

Clear Photo One





Photo Two Caption:

Rear View

Clear Photo Two

### **ELEVATION CERTIFICATE**

### IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11 BUILDING PHOTOGRAPHS

Continuation Page

	ng Street Address (including	FOR INSURANCE COMPANY USE	
City:	01 N Porter Avenue Norman	State: OK ZIP Code:73071	Policy Number:

Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

#### Photo Three



Photo Three Caption:

North Side

Clear Photo Three

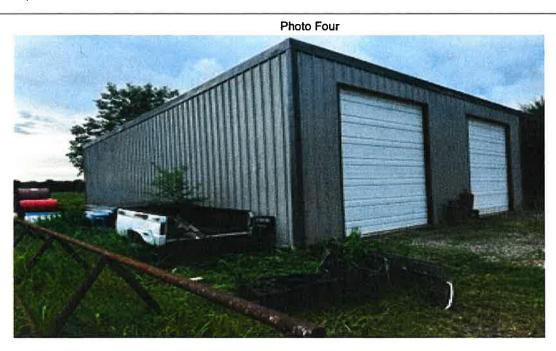


Photo Four Caption:

North Side and Front View

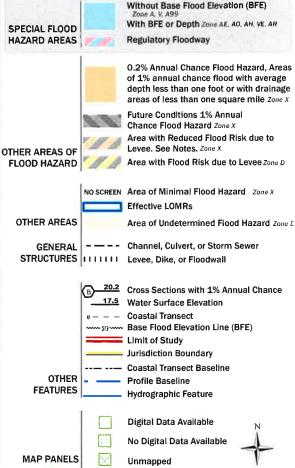
Clear Photo Four

### National Flood Hazard Layer FIRMette





SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT



This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

The pin displayed on the map is an approximate

an authoritative property location.

point selected by the user and does not represent

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 5/29/2025 at 6:13 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.



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

OMB Control No. 1660-0008 Expiration Date: 06/30/2026

#### **ELEVATION CERTIFICATE**

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11
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:Jackson Freedom Farms LLC	Policy Number:
Az. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.U. Route and Box	Company NAIC Number:
4701 N. Porter Avenue	
City: Norman State: OK	ZIP Code:73071
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Num Part of the NW/4 Section 8, T. 9 N., R. 2 W., I.M.	ber:
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.):  Accessory-Ea	st
A5. Latitude/Longitude: Lat. 35°16'29.24"N Long. 97°26'14.39"W Horiz. Datum:	NAD 1927 □NAD 1983 粒WGS 84
A6. Attach at least two and when possible four clear color photographs (one for each side) of the bu	uilding (see Form pages 7 and 8).
A7. Building Diagram Number: <sup>1</sup> A	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s): 0.00 sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area?	□Yes □No ☑N/A
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot a Non-engineered flood openings: 0 Engineered flood openings: 0	
d) Total net open area of non-engineered flood openings in A8.c: 0.00 sq. in.	-
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructio	ns): sq. ft.
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions):0.00sq. ft.	*
A9. For a building with an attached garage:	
a) Square footage of attached garage: sq. ft.	
b) Is there at least one permanent flood opening on two different sides of the attached garage?	□Yes □No ⊠N/A
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adja  Non-engineered flood openings:0 Engineered flood openings:0	cent grade:
d) Total net open area of non-engineered flood openings in A9.c: 0.00 sq. in.	
e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructio	ns): <u>0.00</u> sq. ft.
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): sq. ft.	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFOR	RMATION
B1.a. NFIP Community Name: City of Norman B1.b. NFIP Com	munity Identification Number: 400046
B2. County Name: Cleveland B3. State: OK B4. Map/Panel No.:	40027C0190 B5. Suffix:J
B6. FIRM Index Date: B7. FIRM Panel Effective/Revised Date:02/20/2	2013
B8. Flood Zone(s): AE and A B9. Base Flood Elevation(s) (BFE) (Zone AO, use B	Base Flood Depth):1106.00
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9:  OFIS OFIRM Ocommunity Determined Oother:	
B11. Indicate elevation datum used for BFE in Item B9:	Source:
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Prote Designation	ected Area (OPA)?
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)?   ☐Yes  ☐	No

#### **ELEVATION CERTIFICATE**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	FOR INSURANCE COMPANY USE
4701 N. Porter Avenue	Policy Number:
City: Norman State: OK ZIP Code: _73071	Company NAIC Number:
SECTION C. DIVILDING ELEVATION INFORMATION (SUD)	VEV BEOLIBED)
SECTION C - BUILDING ELEVATION INFORMATION (SUR	_
C1. Building elevations are based on:	truction*   Finished Construction
C2. Elevations – Zones A1–A30, AE, AH, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AI A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7 Benchmark Utilized: Norman GPS 366 Vertical Datum: NAVD	'. In Puerto Rico only, enter meters.
Indicate elevation datum used for the elevations in items a) through h) below.  ☐NGVD 1929 ØNAVD 1988 ☐Other:	
Datum used for building elevations must be the same as that used for the BFE. Conversion factor in the Section D Comments area.	
	Check the measurement used:  107.00
b) Top of the next higher floor (see Instructions):	C feet C meters
c) Bottom of the lowest horizontal structural member (see Instructions):	feet
d) Attached garage (top of slab):	🖸 feet 🖸 meters
e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area):	N/A
	105.3 <b>S</b> feet <b>D</b> meters
	1107.9 Sefeet meters
h) Finished LAG at lowest elevation of attached deck or stairs, including structural	O lod: — meters
	I/A
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT O	ERTIFICATION
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorize I certify that the information on this Certificate represents my best efforts to interpret the data as statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.	d by state law to certify elevation information. vailable. I understand that any false
   Were latitude and longitude in Section A provided by a licensed land surveyor? ■Yes ■N	ło
Check here if attachments and describe in the Comments area.	
Certifier's Name: Randall Mansfield License Number: 1613	ultilinininininininininininininininininin
Title: Land Surveyor	JIM OFESSIONAL CENTER
Company Name: Cowan Group Engineering	RANDALL S
Address: 7100 N Classen Boulevard, Suite 500	MANSFIELD MANSFIELD
City: Oklahoma City State: OK ZIP Code: _7311	6 1613
Telephone: 405-463-3369 Ext.: Email: _rmansfield@cowangroup.co	Orra conta
Date: 6/4/2	Toza
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) incommunity official, (3) incommunity official, (3) incommunity official, (3) incommunity official, (4) incommunity official, (5) incommunity official, (6) incommunity official, (7) incommunity official, (8)	
Comments (including source of conversion factor in C2; type of equipment and location per C2	e; and description of any attachments):

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.	O. Route and	Box No.:	FOR INSURA	NCE COMPANY USE				
4701 N Porter Avenue		Policy Number:						
City: Norman State: OK ZIP	071	Company NAIC	C Number:					
SECTION E — BUILDING MEASUREMENT INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO, ZONE AR/AO, AND ZONE A (WITHOUT BFE)								
For Zones AO, AR/AO, and A (without BFE), complete Items E1–E5. For It intended to support a Letter of Map Change request, complete Sections A, enter meters.								
Building measurements are based on: Construction Drawings* B *A new Elevation Certificate will be required when construction of the build	-		* <b>G</b> Finished	Construction				
E1. Provide measurements (C.2.a in applicable Building Diagram) for the measurement is above or below the natural HAG and the LAG.	following and	d check the ap	propriate boxes	to show whether the				
a) Top of bottom floor (including basement, crawlspace, or enclosure) is:	_ Geet	O meters	☐above or	☐below the HAG.				
b) Top of bottom floor (including basement, crawlspace, or enclosure) is:	Geet	O meters	☐above or	☐below the LAG.				
E2. For Building Diagrams 6–9 with permanent flood openings provided in next higher floor (C2.b in applicable	Section A It	ems 8 and/or	9 (see pages 1–	2 of Instructions), the				
Building Diagram) of the building is:	🖸 feet	O meters	☐above or	□below the HAG.				
E3. Attached garage (top of slab) is:	_ 🚨 feet	O meters	☐above or	☐below the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is:	leet	meters	☐above or	Delow 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?								
SECTION F - PROPERTY OWNER (OR OWNER'S AUT	HORIZED	REPRESEN	TATIVE) CERT	(IFICATION				
The property owner or owner's authorized representative who completes S sign here. The statements in Sections A, B, and E are correct to the best of			ne A (without BF	E) or Zone AO must				
Check here if attachments and describe in the Comments area.								
Property Owner or Owner's Authorized Representative Name:								
Address:								
City:		State:	ZIP Code:	:=				
Telephone: Ext.: Email:								
	Date:							
Comments:								
*								
		51						

#### **ELEVATION CERTIFICATE**

IMPORTANT: MUST FOLLOW THE INSTRU	500 111							
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or 4701 N Porter Avenue	F.O. Route and Box No	SURANCE COMPANY USE						
City: Norman State: OK Z	IP Code: 73071	Policy Number:						
SECTION G - COMMUNITY INFORMATION (RECOMM	ENDED FOR COMMUNITY OFFICE	AL COMPLETION)						
The local official who is authorized by law or ordinance to administer the Section A, B, C, E, G, or H of this Elevation Certificate. Complete the ap		ordinance can complete						
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, lengineer, or architect who is authorized by state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)								
G2.a. A local official completed Section E for a building located in Zocompleted for a building located in Zone AO.	ne A (without a BFE), Zone AO, or Zor	ne AR/AO, or when item E5 is						
G2.b.   A local official completed Section H for insurance purposes.								
G3.	s specific corrections to the information	in Sections A, B, E and H.						
G4. The following information (Items G5-G11) is provided for com	munity floodplain management purpose	<b>3</b> S.						
G5. Permit Number: G6. Date Perm	it issued:							
G7. Date Certificate of Compliance/Occupancy Issued:								
G8. This permit has been issued for: New Construction Sub	stantial Improvement							
G9.a. Elevation of as-built lowest floor (including basement) of the building:	Ofeet Ometers	Datum:						
G9.b. Elevation of bottom of as-built lowest horizontal structural member:	Ofeet Ometers	Datum:						
G10.a. BFE (or depth in Zone AO) of flooding at the building site:	Gfeet Ometers	Datum:						
G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:								
G11. Variance issued? Two D	Ofeet Ometers							
Tes UNO II yes, attach documenta	tion and describe in the Comments are							
The local official who provides information in Section G must sign here. correct to the best of my knowledge. If applicable, I have also provided	I have completed the information in Sec specific corrections in the Comments at	ction G and certify that it is rea of this section.						
Local Official's Name:	Title:							
NFIP Community Name:								
Telephone: Ext.: Email:								
Address:								
City:	State: ZIP	Code:						
	Date:							
Comments (including type of equipment and location, per C2.e; descrip Sections A, B, D, E, or H):	ion of any attachments; and correction	s to specific information in						

#### **ELEVATION CERTIFICATE**

	including Apt., Unit, Suite	e, and/or Bldg. No.) or P.	O. Route and Box No.:	FOR IN	SURANCE COMPANY USE		
					Policy Number:		
City:		_ State: ZIP	Code:	Compan	Company NAIC Number:		
SEC	CTION H – BUILDING (SURVEY NOT	'S FIRST FLOOR HEI REQUIRED) (FOR IN			CONES		
The property owner, own to determine the building nearest tenth of a foot (no lnstructions) and the ap	's first floor height for ins earest tenth of a meter ir	urance purposes. Section Puerto Rico). <i>Referenc</i>	ns A, B, and I must also e the Foundation Type	be complete Diagrams (a	at the end of Section H		
H1. Provide the height o	f the top of the floor (as i	ndicated in Foundation T	ype Diagrams) above th	ne Lowest Ad	acent Grade (LAG):		
	ngrams 1A, 1B, 3, and 5 grade floors only for buil osure floors) is:		Ofeet	□ <sub>meters</sub>	D <sub>above the IAG</sub>		
	ngrams 2A, 2B, 4, and 6 floor above basement, c			O <sub>meters</sub>	Dahove the I AG		
	Equipment servicing the later than the Foundation Type Dia				ve the floor indicated by the illding Diagram?		
SECTION I -	- PROPERTY OWNER	R (OR OWNER'S AUT	HORIZED REPRESE	NTATIVE)	CERTIFICATION		
The property owner or ov A, B, and H are correct to indicate in Item G2.b and	o the best of my knowled				The statements in Sections d Section H, they should		
<b>-</b>							
UCheck here if attachme	ents/are provided (includ	ing required photos) and	describe each attachmo	ent in the Cor	nments area.		
Property Owner or Owne		tative Name:					
Property Owner or Owne	er's Authorized Represen	tative Name:					
Property Owner or Owne Address:City:	r's Authorized Represen	tative Name:	State:	ZIP			
Property Owner or Owne Address:City:	r's Authorized Represen	tative Name:	State:	ZIP			
Property Owner or Owne Address:  City:  Celephone:	r's Authorized Represen	tative Name:	State:	ZIP			
Property Owner or Owne Address: City: Felephone:	r's Authorized Represen	tative Name:	State:	ZIP			
Property Owner or Owner Address: City: [elephone:	r's Authorized Represen	tative Name:	State:	ZIP			
Property Owner or Own	r's Authorized Represen	tative Name:	State:	ZIP			
Property Owner or Owner Address:  City: Felephone:	r's Authorized Represen	tative Name:	State:	ZIP			
Property Owner or Owne Address: City: Felephone:	r's Authorized Represen	tative Name:	State:	ZIP			
Property Owner or Owne Address:  City:  Celephone:	r's Authorized Represen	tative Name:	State:	ZIP			
Property Owner or Owne Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP			
Property Owner or Owne Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP			
Property Owner or Owne Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP			
Property Owner or Owne	r's Authorized Represen	tative Name:	State:	ZIP			
Property Owner or Owne Address: City: Telephone:	r's Authorized Represen	tative Name:	State:	ZIP			

#### **ELEVATION CERTIFICATE**

## IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11 BUILDING PHOTOGRAPHS

See Instructions for Item A6.

Building Street Address (including Apt., Uni	FOR INSURANCE COMPANY USE		
4701 N_ Porter Avenue  City:Norman	State: OK	<b>ZIP Code</b> : <u>73071</u>	Policy Number: Company NAIC Number:

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.

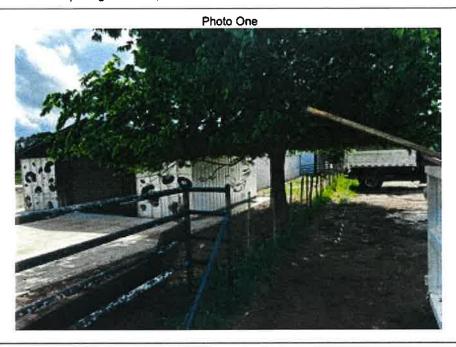


Photo One Caption: East Side Clear Photo One

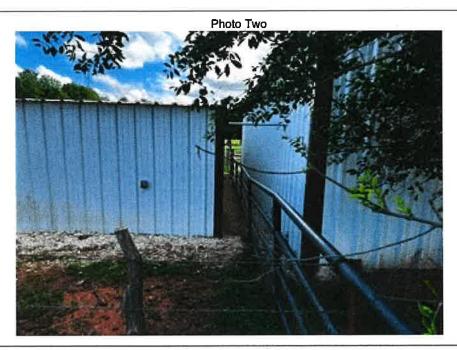


Photo Two Caption:

West Side and North side

Clear Photo Two

# ELEVATION CERTIFICATE IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11 BUILDING PHOTOGRAPHS

Continuation Page

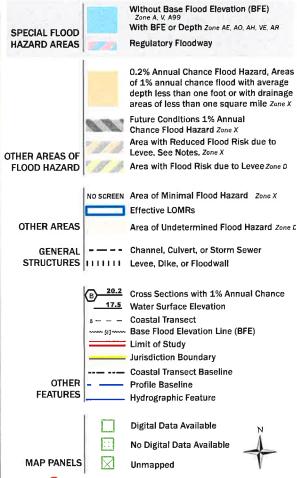
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:  4701 N Porter Avenue  City: Norman  State: OK  ZIP Code: 73071  Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents as indicated in Sections A8 and A9.  Photo Three	∋w," 3,
Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents as indicated in Sections A8 and A9.	∌W," 5,
Photo Three	
Photo Three Caption:  Clear Photo Th	ree
Photo Four	
Photo Four Caption:  Clear Photo F	our

### National Flood Hazard Layer FIRMette



#### Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT



This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

The pin displayed on the map is an approximate point selected by the user and does not represent

an authoritative property location.

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 5/29/2025 at 8:30 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.

