

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

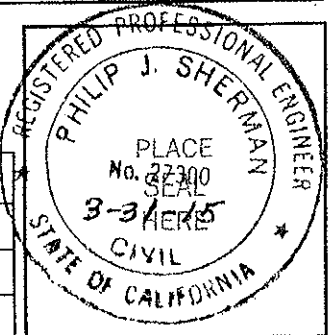
OMB No. 1660-0008  
 Expiration Date: July 31, 2015

| SECTION A - PROPERTY INFORMATION  |                 | FOR INSURANCE COMPANY USE   |
|---|-----------------|---|
| A1. Building Owner's Name <u>Craig L. Beard</u>   |                 | Policy Number:  |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br><u>10738 Creek Rd.</u> |                 | Company NAIC Number:  |
| City <u>Ojai</u>  | State <u>CA</u> | ZIP Code <u>93023</u>   |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)<br><u>AP 084-0-050-195</u>         |                 |   |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>                             |                 |   |
| A5. Latitude/Longitude: Lat. <u>34° 24' 12"</u> Long. <u>119° 16' 58"</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):   |                 | A9. For a building with an attached garage:   |
| a) Square footage of crawlspace or enclosure(s) <u>896</u> sq ft  |                 | a) Square footage of attached garage <u>360</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>           |                 | b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>NONE</u> |
| c) Total net area of flood openings in A8.b <u>990</u> sq in  |                 | c) Total net area of flood openings in A9.b <u>N/A</u> sq in  |
| d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                               |                 | d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <u>N/A</u>  |

| SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  |                        |  |   |  |
|--|------------------------|--|---|--|
| B1. NFIP Community Name & Community Number<br><u>Ventura County (unincorporated) 060413</u>  |                        | B2. County Name<br><u>Ventura County</u>   |   | B3. State<br><u>CA</u>   |
| B4. Map/Panel Number<br><u>061110/0568</u>   | B5. Suffix<br><u>K</u> | B6. FIRM Index Date<br><u>Jan 20, 2010</u> | B7. FIRM Panel Effective/ Revised Date<br><u>Jan 20, 2010</u> | B8. Flood Zone(s)<br><u>AE</u>   |
|  |                        |  |   | B9. Base Flood Elevation(s) (Zone AO, use base flood depth)<br><u>443-00</u> |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in item B9:<br><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<br>Designation Date: <u>1/1/</u> <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <u>N/A</u> |                        |  |   |  |

| 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<br>*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.<br>Benchmark Utilized: <u>49-9 RM-1</u> Vertical Datum: <u>NAVD 1988</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: _____<br>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>442.00</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor  | <u>445.70</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 type="checkbox"/> feet <input type="checkbox"/> meters            |
| d) Attached garage (top of slab)   | <u>449.03</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>449.00</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)   | <u>442.75</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)  | <u>444.00</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>445.60</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 checked="" type="checkbox"/> Check here if attachments.  |  |   |  |                          |  |
| Certifier's Name<br><u>Philip J. Sherman</u>  |  | License Number<br><u>27300</u>                |  |                          |  |
| Title<br><u>Owner/Principal Engineer</u>  |  | Company Name<br><u>Philip J. Sherman P.E.</u> |  |                          |  |
| Address<br><u>P.O. Box 664</u>  |  | City<br><u>Oak View</u>                       | State<br><u>CA</u>   | ZIP Code<br><u>93022</u> |  |
| Signature<br><u>Philip J. Sherman</u>   |  | Date<br><u>10/29/13</u>                       | Telephone<br><u>805-501-4599</u>   |                          |  |



**ELEVATION CERTIFICATE, page 2**

|   |                    |                                  |                      |
|---|--------------------|----------------------------------|----------------------|
| <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><i>10738 Creek Rd.</i> |                    | Policy Number:                   |                      |
| City<br><i>Ojai</i>   | State<br><i>CA</i> | ZIP Code<br><i>93023</i>         | 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  
*All floors are above flood limit except crawlspace which is at 442.00. Main floor is 445.70  
 Air conditioner compressor is above flood limit. Bottom at 444.0.  
 Flood openings into crawlspace were measured (16.5 x 7.5 x 8 = 990)*

Signature *Philip J. Sherman* Date *10/29/13*

**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 N/A feet  meters  above or  below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is N/A 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 N/A feet  meters  above or  below the HAG.

E3. Attached garage (top of slab) is N/A feet  meters  above or  below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is N/A 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 *Philip J. Sherman*

Address *P.O. Box 664* City *Oak View* State *CA* ZIP Code *93023*

Signature *Philip J. Sherman* Date *10/29/13* Telephone *805-501-4599*

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<br><i>FP95-013/FP2013-29</i> | G5. Date Permit Issued<br><i>1995 / 10-17-13</i> | G6. Date Certificate Of Compliance/Occupancy Issued<br><i>April 9, 1996</i> |
|--|--|---|

G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: 442.0 feet  meters Datum 1988 NAUD

G9. BFE or (in Zone AO) depth of flooding at the building site: 443.0 feet  meters Datum 1988 NAUD

G10. Community's design flood elevation: 444.0 feet  meters Datum 1988 NAUD

Local Official's Name *Brian Trushinski* Title *Floodplain Manager*

Community Name *Ventura County (Unincorporated Areas)* Telephone *(805) 477-1967*

Signature *[Signature]* Date

Comments  
*Original project file was damaged in chemical spill at County facility. Not all flood vent openings are less than one foot (1'-0") above adjacent grade but Applicant's Civil Engineer certifies foundation is built to hydrodynamic and hydrostatic pressures under Q100 conditions as per report dated Nov. 11, 2013, attached.*

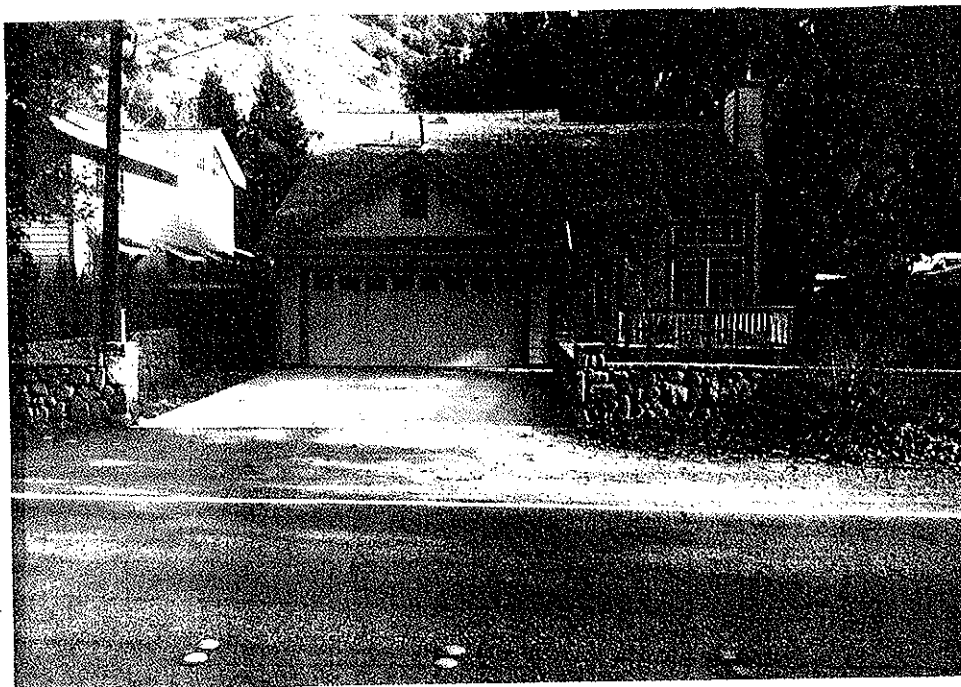
Check here if attachments.

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

|   |                    |                                  |
|---|--------------------|----------------------------------|
| <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 R.O. Route and Box No.<br><i>10738 Creek Rd.</i> |                    | Policy Number:                   |
| City<br><i>Ojai</i>   | State<br><i>CA</i> | ZIP Code<br><i>93023</i>         |
|   |                    | 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.



*NORTH SIDE - FRONT*

*10/29/13*



*SOUTH SIDE - REAR*

*10/29/13*

|   |                    |                          |                                  |
|---|--------------------|--------------------------|----------------------------------|
| <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><i>10738 Creek Rd.</i> |                    |                          | Policy Number:                   |
| City<br><i>Ojai</i>   | State<br><i>CA</i> | ZIP Code<br><i>93023</i> | 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.



*WEST SIDE*

*10/29/13*



*EAST SIDE*

*10/29/13*

***Philip J. Sherman P.E.***

CIVIL ENGINEERING

SURVEYING

**Professional registered engineer**

LAND DEVELOPMENT

Phone 805-501-4599 ~ e-mail pjspror@sbcglobal.net

## TRANSMITTAL

November 11, 2013

TO: FLOODPLAIN MAMAGEMENT, ATTN. BRIAN TRUSHINSKI

FROM: PHILIP J. SHERMAN

SUBJECT: FOUNDATION CALCULATIONS, 10738 CREEK RD., OJAI

Calculations as you requested. The potential flooding will not reach any of the openings as it is less than one foot deep.

If questions please call.

Respectfully submitted;



Philip J. Sherman P.E.

This Wall in File: C:\RP5\Pjs.rp5

Retain Pro 2007 , 8-Mar-2009, (c) 1989-2009  
www.retainpro.com/support for latest release  
Registration # : RP-1187155 RP2007-Q

## Restrained Retaining Wall Design

Code: CBC 2007

### Criteria

|                         |   |          |
|-------------------------|---|----------|
| Retained Height         | = | 1.00 ft  |
| Wall height above soil  | = | 0.67 ft  |
| Total Wall Height       | = | 1.67 ft  |
| Top Support Height      | = | 1.67 ft  |
| Slope Behind Wal        | = | 0.00 : 1 |
| Height of Soil over Toe | = | 0.00 in  |
| Water height over heel  | = | 0.0 ft   |

Wind on Stem = 0.0 psf

Vertical component of active lateral soil pressure options:

USED for Soil Pressure.

NOT USED for Sliding Resistance.

USED for Overturning Resistance.

### Soil Data

|  |   |              |
|--|---|--------------|
| Allow Soil Bearing                         | = | 1,000.0 psf  |
| Equivalent Fluid Pressure Method           | = |              |
| Heel Active Pressure                       | = | 64.4 psf/ft  |
| Toe Active Pressure                        | = | 35.0 psf/ft  |
| Passive Pressure                           | = | 250.0 psf/ft |
| Soil Density                               | = | 110.00 pcf   |
| Footings  Soil Frictior                    | = | 0.300        |
| Soil height to ignore for passive pressure | = | 0.00 in      |

### Footing Strengths & Dimensions

|                          |   |            |
|--------------------------|---|------------|
| Toe Width                | = | 0.00 ft    |
| Heel Width               | = | 1.00       |
| Total Footing Width      | = | 1.00       |
| Footing Thickness        | = | 13.00 in   |
| Key Width                | = | 0.00 in    |
| Key Depth                | = | 0.00 in    |
| Key Distance from Toe    | = | 0.00 ft    |
| f <sub>c</sub>           | = | 2,000 psi  |
| F <sub>y</sub>           | = | 60,000 psi |
| Footing Concrete Density | = | 150.00 pcf |
| Min. As %                | = | 0.0018     |
| Cover @ Top              | = | 2.00 in    |
| @ Btm.                   | = | 3.00 in    |

### Surcharge Loads

|   |   |         |
|---|---|---------|
| Surcharge Over Heel                     | = | 0.0 psf |
| >>>Used To Resist Sliding & Overturning | = |         |
| Surcharge Over Toe                      | = | 0.0 psf |
| Used for Sliding & Overturning          | = |         |

### Axial Load Applied to Stem

|                         |   |          |
|-------------------------|---|----------|
| Axial Dead Load         | = | 50.0 lbs |
| Axial Live Load         | = | 0.0 lbs  |
| Axial Load Eccentricity | = | 0.0 in   |

### Uniform Lateral Load Applied to Stem

|                     |   |          |
|---------------------|---|----------|
| Lateral Load        | = | 0.0 #/ft |
| ...Height to Top    | = | 0.00 ft  |
| ...Height to Bottom | = | 0.00 ft  |

### Adjacent Footing Load

|                                       |   |           |
|---------------------------------------|---|-----------|
| Adjacent Footing Load                 | = | 0.0 lbs   |
| Footing Width                         | = | 0.00 ft   |
| Eccentricity                          | = | 0.00 in   |
| Wall to Ftg CL Dist                   | = | 0.00 ft   |
| Footing Type                          | = | Line Load |
| Base Above/Below Soil at Back of Wall | = | 0.0 ft    |
| Poisson's Ratio                       | = | 0.300     |

### Earth Pressure Seismic Load

K<sub>h</sub> Soil Density Multiplier = 0.200 g Added seismic per unit area = 15.6 psf

### Stem Weight Seismic Load

F<sub>p</sub> / W<sub>p</sub> Weight Multiplier = 0.200 g Added seismic per unit area = 17.6 psf

### Design Summary

|                                   |   |            |
|-----------------------------------|---|------------|
| Total Bearing Load                | = | 425 lbs    |
| ...resultant ecc.                 | = | 0.08 in    |
| Soil Pressure @ Toe               | = | 442 psf OK |
| Soil Pressure @ Heel              | = | 408 psf OK |
| Allowable                         | = | 1,000 psf  |
| Soil Pressure Less Than Allowable | = |            |
| ACI Factored @ Toe                | = | 530 psf    |
| ACI Factored @ Heel               | = | 490 psf    |
| Footing Shear @ Toe               | = | 0.0 psi OK |
| Footing Shear @ Heel              | = | 0.0 psi OK |
| Allowable                         | = | 67.1 psi   |
| Reaction at Top                   | = | 25.9 lbs   |
| Reaction at Bottom                | = | 159.1 lbs  |

Sliding Calcs Slab Resists All Sliding !  
Lateral Sliding Force = 159.1 lbs

### Masonry Stem Construction

|  |   |               |   |   |            |                     |   |           |
|--|---|---------------|---|---|------------|---------------------|---|-----------|
| Thickness                                | = | 12.00 in      | f <sub>m</sub>                            | = | 1,500 psi  | Short Term Factor   | = | 1.000     |
| Wall Weight                              | = | 124.0 psf     | F <sub>s</sub>                            | = | 24,000 psi | Equiv. Solid Thick. | = | 11.600 in |
| Stem is FREE to rotate at top of footing | = |               | n Ratio (E <sub>s</sub> /E <sub>m</sub> ) | = |            |                     | = | 21.481    |
| Block Type                               | = | Medium Weight |   |   |            |                     |   |           |
| Design Method                            | = | ASD           |   |   |            |                     |   |           |

|                               | @ Top Support     | Mmax Between Top & Base | @ Base of Wall    |
|-------------------------------|-------------------|-------------------------|-------------------|
| Design Height Above Ftg       | Stem OK = 1.67 ft | Stem OK = 0.68 ft       | Stem OK = 0.00 ft |
| Rebar Size                    | = # 4             | = # 4                   | = # 4             |
| Rebar Spacing                 | = 32.00 in        | = 8.00 in               | = 32.00 in        |
| Rebar Placed at               | = Edge            | = Edge                  | = Edge            |
| Rebar Depth 'd'               | = 9.00 in         | = 9.00 in               | = 9.00 in         |
| Design Data                   |                   |                         |                   |
| fb/FB + fa/Fa                 | = 0.000           | = 0.003                 | = 0.000           |
| Moment....Actual              | = 0.0 ft-#        | = 15.8 ft-#             | = 0.0 ft-#        |
| Moment....Allowable           | = 1,278.7 ft-#    | = 4,876.4 ft-#          | = 1,278.7 ft-#    |
| Shear Force @ this height     | = 25.9 lbs        |                         | = 51.5 lbs        |
| Shear....Actual               | = 0.23 psi        |                         | = 0.45 psi        |
| Shear....Allowable            | = 38.73 psi       |                         | = 38.73 psi       |
| Rebar Lap Required            | = 20.00 in        | = 20.00 in              |                   |
| Hooked embedment into footing |                   |                         | = 9.39 in         |

### Other Acceptable Sizes & Spacings:

|                     |      |                        |
|---------------------|------|------------------------|
| Toe: None Spec'd    | -or- | Not req'd, Mu < S * Fr |
| Heel: None Spec'd   | -or- | Not req'd, Mu < S * Fr |
| Key: No key defined | -or- | No key defined         |

### Load Factors

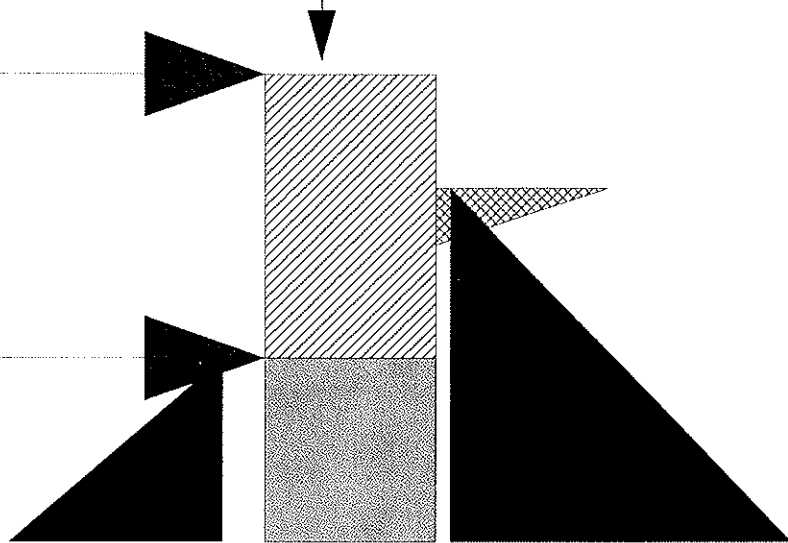
|               |          |
|---------------|----------|
| Building Code | CBC 2007 |
| Dead Load     | 1.200    |
| Live Load     | 1.600    |
| Earth, H      | 1.600    |
| Wind, W       | 1.300    |
| Seismic, E    | 1.000    |

DL= 50., LL= 0.#, Ecc= 0.in

Lateral Restraint

25.9 #

Sliding Restraint



Pp= 146.7#

159.06#

408.42psf

441.9psf