

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

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

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name SBA Network Services, LLC
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P O Route and Box No.
4700 Willow Grove Drive
 City Norman State OK ZIP Code 73072
 FOR INSURANCE COMPANY USE
 Policy Number:
 Company NAIC Number:

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
5029-9-3W-34-020

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Non-Residential (Existing Cell Tower Shelter Room)
 A5. Latitude/Longitude: Lat. 35.12.38.0931 Long. 97.30.40.2134
 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.
 A7. Building Diagram Number 5
 A8. For a building with a crawlspace or enclosure(s):
 a) Square footage of crawlspace or enclosure(s) N/A sq ft
 b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A sq in
 c) Total net area of flood openings in A8.b N/A sq in
 d) Engineered flood openings? Yes No

A9. For a building with an attached garage:
 a) Square footage of attached garage N/A sq ft
 b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A sq in
 c) Total net area of flood openings in A9.b N/A sq in
 d) Engineered flood openings? Yes No

Horizontal Datum: NAD 1927 NAD 1983

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number *
Cleveland County Oklahoma 400475#
 B2. County Name Cleveland B3. State OK
 B4. Map/Panel Number 40027C0260 B5. Suffix H
 B6. FIRM Index Date MARCH 17, 1997
 B7. FIRM Panel Effective/Revised Date SEPTEMBER 26, 2008
 B8. Flood Zone(s) AE
 B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 1112.8

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other/Source: _____

B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
 Designation Date: N/A CBRS OPA

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:
 Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete items C2 a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: GPS Survey, NAD83 Vertical Datum: GPS Survey, NAVD88

Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Other/Source: _____
 Datum used for building elevations must be the same as that used for the BFE.

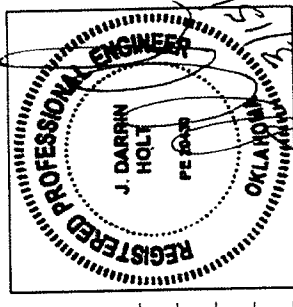
- Check the measurement used.
- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 1117.6 feet meters
 - b) Top of the next higher floor N/A/N/A feet meters
 - c) Bottom of the lowest horizontal structural member (V Zones only) N/A/N/A feet meters
 - d) Attached garage (top of slab) N/A/N/A feet meters
 - e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 1117.6 feet meters
 - f) Lowest adjacent (finished) grade next to building (LAG) 1108.0 feet meters
 - g) Highest adjacent (finished) grade next to building (HAG) 1108.0 feet meters
 - h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N/A/N/A feet meters

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

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

Certifier's Name Darrin J. Holt License Number PE20430
 Title Owner Company Name FDH Engineering, Inc.
 Address 6521 Meridian Drive City Raleigh State NC ZIP Code 27616
 Signature _____ Date 3/14/13 Telephone 919-755-1012



* See corrections on attached memo

ELEVATION CERTIFICATE, page 2

IMPORTANT: In these spaces, copy the corresponding information from Section A.

FOR INSURANCE COMPANY USE
Policy Number:
Company NAIC Number:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 4700 Willow Grove Drive
State OK ZIP Code 73072
City Norman

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

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

Comments The building is on a raised steel platform 9.6ft above grade. The equipment in the shelter is electrical and mechanical components serving a cellular tower.

Signature _____ Date _____

SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
 - a) Top of bottom floor (including basement, crawlspace, or enclosure) is N/A/N/A feet meters above or below the HAG.
 - b) Top of bottom floor (including basement, crawlspace, or enclosure) is N/A/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/N/A feet meters above or below the HAG.
- E3. Attached garage (top of slab) is N/A/N/A feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is N/A/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's or Owner's Authorized Representative's Name N/A
 address N/A City N/A State N/ ZIP Code N/A
 Signature N/A Date N/A Telephone N/A
 Comments N/A

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

Local Official's Name N/A Title N/A
 Community Name N/A Telephone N/A
 Signature N/A Date N/A
 Comments N/A

Check here if attachments.

Building Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
4700 Willow Grove Drive

City Norman

State OK ZIP Code 73072

FOR INSURANCE COMPANY USE

Policy Number:

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.

Building Photographs

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
700 Willow Grove Drive

City Norman

State OK

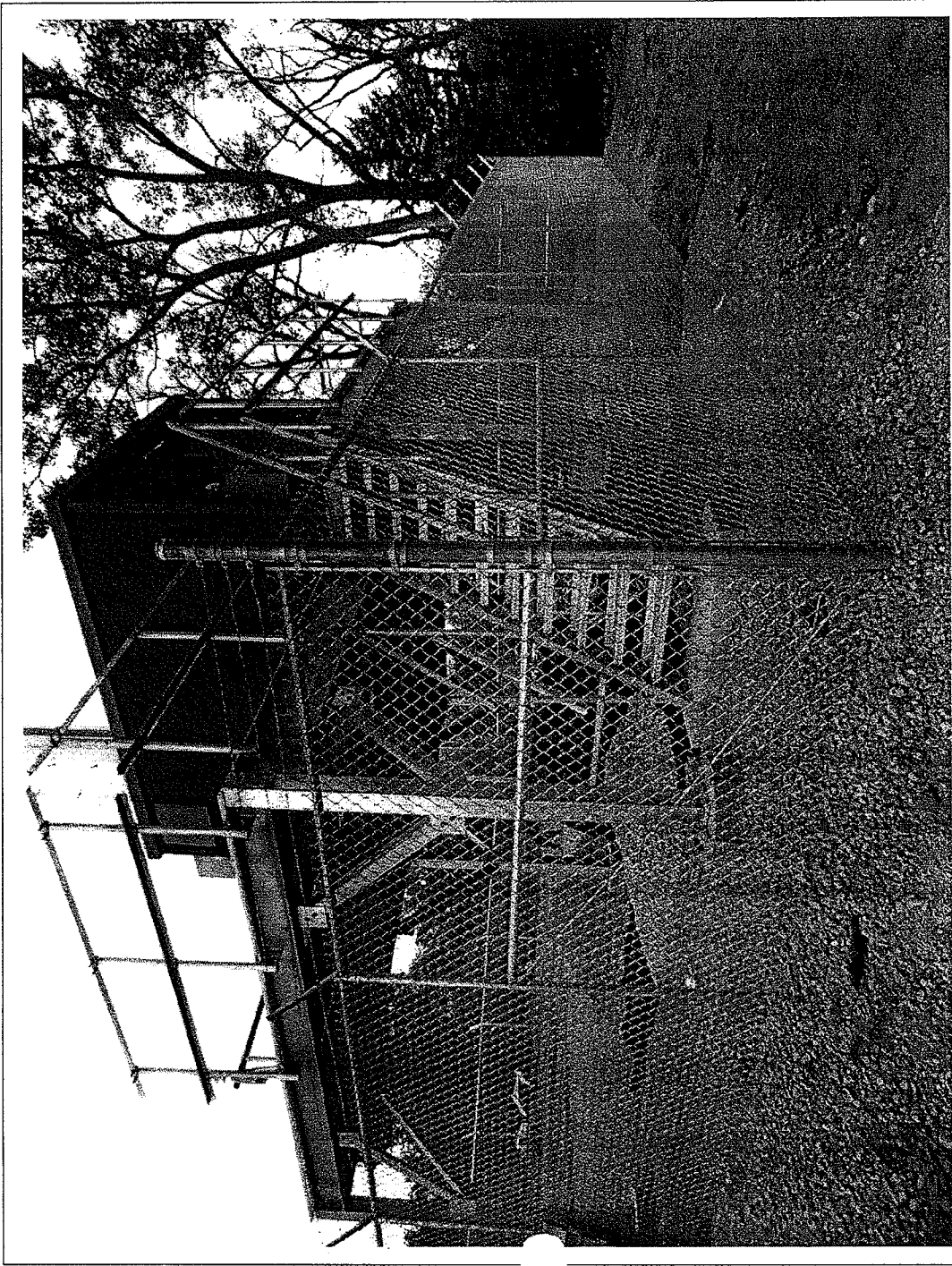
ZIP Code 73072

FOR INSURANCE COMPANY USE

Policy Number:

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.





The City of NORMAN

201 West Gray, Bldg. A • P.O. Box 370
Norman, Oklahoma 73069 • 73070

Memo of Review for Accuracy and Completion

The attached FEMA Elevation Certificate has been reviewed by this office. The items noted below are not correct on the attached form and should read as entered on this page.

U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

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

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name		FOR INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or RO, Route and Box No.		Policy Number:
City		Company NAIC Number:
State		ZIP Code

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) _____ Horizontal Datum: NAD 1927 NAD 1983
A5. Latitude/Longitude: Lat. _____ Long. _____
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number _____
A8. For a building with a crawlspace or enclosure(s):
a) Square footage of crawlspace or enclosure(s) _____ sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____ sq in
c) Total net area of flood openings in A8.b _____ sq in
d) Engineered flood openings? Yes 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 _____ sq in
c) Total net area of flood openings in A9.b _____ sq in
d) Engineered flood openings? Yes No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. FIP Community Name & Community Number <i>Norman 400046</i>	B2. County Name	B3. State
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date
		<i>2-20-13</i>
		B7. FIRM Panel Effective/Revised Date
		<i>9-26-08</i>
		B8. Flood Zone(s)
		B9. Base Flood Elevation(s) (Zone AO, use base flood depth)

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:
 FIS Profile FIRM Community Determined Other/Source: _____

B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source: _____
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
Designation Date: _____ / _____ / _____ CBRS OPA

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: _____ Vertical Datum: _____

Datum used for building elevations must be the same as that used for the BFE. NAVD 1929 NAVD 1988 Other/Source: _____

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	_____ feet	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	_____ feet	<input type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____ feet	<input type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	_____ feet	<input type="checkbox"/> feet	<input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	_____ feet	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	_____ feet	<input type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	_____ feet	<input type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<i>1108.0</i> feet	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters

Local Officials Name *Todd M. McLellan* Title *Development Engineer*
 Community Name *Norman* Telephone *405-217-7704*
 Signature *Todd M. McLellan* Date *3-22-13*
 Comments _____