

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:
BUILDING OWNER'S NAME Fremont Holding, L.L.C., a Delaware Limited Liability Co.			Policy Number
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 34801 Campus Drive			Company NAIC Number
CITY Fremont	STATE CA	ZIP CODE 94555	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Parcel 16, PM 4483, Alameda County Tax Assessor's Parcel Number 543-0439-108 & 543-0439-109			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Non-residential			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###.###" or ###.#####°)		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Fremont 065028		B2. COUNTY NAME Alameda		B3. STATE CA	
B4. MAP AND PANEL NUMBER 065028 0025	B5. SUFFIX C	B6. FIRM INDEX DATE 02/09/00	B7. FIRM PANEL EFFECTIVE/REVISED DATE 07/16/1987	B8. FLOOD ZONE(S) A1&C	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 8

- B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe): _____
- B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe): _____
- B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date _____

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. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

- C3. 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

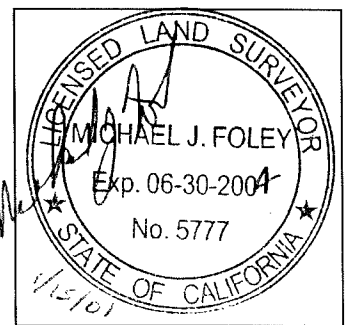
Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum NGVD 1929 Conversion/Comments _____

Elevation reference mark used EBDA46 Does the elevation reference mark used appear on the FIRM? Yes No

- | | |
|---|----------------|
| <input type="checkbox"/> a) Top of bottom floor (including basement or enclosure) | 11. 7 ft.(m) |
| <input type="checkbox"/> b) Top of next higher floor | N/A. ___ft.(m) |
| <input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only) | N/A. ___ft.(m) |
| <input type="checkbox"/> d) Attached garage (top of slab) | N/A. ___ft.(m) |
| <input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) | N/A. ___ft.(m) |
| <input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG) | 8. 0 ft.(m) |
| <input type="checkbox"/> g) Highest adjacent (finished) grade (HAG) | 11. 6 ft.(m) |
| <input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 0 | |
| <input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h 0 sq. in. (sq. cm) | |

License Number, Embossed Seal, Signature, and Date



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 in Sections A, B, and C 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.

CERTIFIER'S NAME Michael J. Foley

LICENSE NUMBER LS 5777

TITLE Land Surveyor

COMPANY NAME Kier & Wright, Civil Engineers & Surveyors, Inc.

ADDRESS
1233 Quarry Lane, Suite 145

CITY
Pleasanton

STATE
CA

ZIP CODE
94566

SIGNATURE

Michael J. Foley

DATE

1/15/01

TELEPHONE
925-249-6555

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 34801 Campus Drive			Policy Number
CITY Fremont	STATE CA	ZIP CODE 94555	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
Elevation reference mark used "EBDA 46" Elevation = 7.403 based on NGVD of 1929, 1979 city of Fremont Adjustment

Check here if attachments

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

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number __ (Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is ___ ft.(m) ___ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ___ ft.(m) ___ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. For 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, C (Items C3.h and C3.i only), 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, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPHONE	

COMMENTS

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____
- G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE

COMMENTS

Check here if attachments

PUBLIC BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average .35 hour per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing and reviewing the form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Federal Emergency Management Agency, 500 C Street, S.W., Washington, DC 20472; and to the Office of Management and Budget, Paperwork Reduction Project (3067-0148), Washington, DC 20503.

You are not required to respond to this collection of information unless a valid OMB Control Number is displayed in the upper right corner of this form.

FREMONT, CALIFORNIA
Community Name

34781 + 34801 CAMPUS DRIVE
Property Name or Address

The Fill is: Existing Proposed

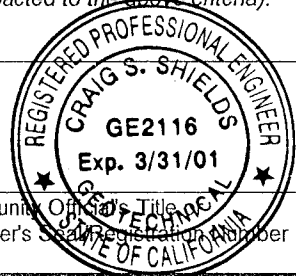
I hereby certify that fill placed on the property to raise the ground surface to or above the base flood elevation in order to gain exclusion from a Special Flood Hazard Area meets the criteria of Title 44 of the Code of Federal Regulations, Section 65.5(a)(6), listed below. For proposed fill, I hereby certify that it is designed in accordance with these criteria. *Please note* Both Section 1 and Section 2 must be certified; however, different individuals may certify them.

SECTION 1

1. The fill has been compacted to 95 percent of the maximum density obtainable with the Standard Proctor Test method or an acceptable equivalent method for (*check one of the following*):

- a. Fill pads prepared for the foundations of residential or commercial structures
- b. Entire legally defined parcel (*Note: if the location of fill pads has not been determined, the fill over the entire legally defined parcel must be compacted to the above criteria.*)

Name (please print or type): Craig S. Shields
Craig S. Shields
Signature
4/03/01
Date



Community Official's Title or
Engineer's Seal/Registration Number

SECTION 2

- 2. Fill slopes for granular materials are not steeper than one vertical on one-and-one-half horizontal (*steeper slopes must be justified*); and
- 3. Adequate erosion protection is provided for fill slopes exposed to moving flood waters (*slopes exposed to flows with velocities of up to 5 feet per second (fps) during the base flood must, at a minimum, be protected by a permanent cover of grass, vines, weeds, or similar vegetation; slopes exposed to flows with velocities greater than 5 fps during the base flood must, at a minimum, be protected by appropriately designed stone, rock, concrete, or other durable products.*)

Name (please print or type): _____

Signature

Date

Community Official's Title or
Engineer's Seal/Registration Number

PLEASE REFER TO THE INSTRUCTIONS FOR THE APPROPRIATE MAILING ADDRESS