DEPARTMENT OF HOMELAND SECURITY - FEDERAL EMERGENCY MANAGEMENT AGENCY PROPERTY INFORMATION FORM

O.M.B. NO. 1660-0015 Expires February 28, 2014

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this data collection is estimated to average 1.63 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing and submitting the form. This collection is required to obtain or retain

benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 1800 South Bell Street, Arlington, VA 20598-3005, Paperwork Reduction Project (1660-0015). NOTE: Do not send your completed form to this address. This form may be completed by the property owner, property owner's agent, licensed land surveyor, or registered professional engineer to support a request for a Letter of Map Amendment (LOMA), Conditional Letter of Map Amendment (CLOMA), Letter of Map Revision Based on Fill (LOMR-F), or Conditional Letter of Map Revision Based on Fill (CLOMR-F) for existing or proposed, single or multiple lots/structures. In order to process your request, all information on this form must be completed in its entirety, unless stated as optional. Incomplete submissions will result in processing delays. Please check the item below that describes your request: A letter from DHS-FEMA stating that an existing structure or parcel of land that has not been elevated ☐ LOMA by fill (natural grade) would not be inundated by the base flood. A letter from DHS-FEMA stating that a proposed structure that is not to be elevated by fill (natural ☐ CLOMA grade) would not be inundated by the base flood if built as proposed. A letter from DHS-FEMA stating that an existing structure or parcel of land that has been elevated by LOMR-F fill would not be inundated by the base flood. A letter from DHS-FEMA stating that a parcel of land or proposed structure that will be elevated by fill CLOMR-F would not be inundated by the base flood if fill is placed on the parcel as proposed or the structure is built as proposed. Fill is defined as material from any source (including the subject property) placed that raises the ground to or above the Base Flood Elevation (BFE). The common construction practice of removing unsuitable existing material (topsoil) and backfilling with select structural material is not considered the placement of fill if the practice does not alter the existing (natural grade) elevation, which is at or above the BFE. Fill that is placed before the date of the first National Flood Insurance Program (NFIP) map showing the area in a Special Flood Hazard Area (SFHA) is considered natural grade. Has fill been placed on your property to raise 11/10/2024 Yes No ground that was previously below the BFE? If yes, when was fill placed? mm/dd/yyyy Will fill be placed on your property to raise Yes* ■ No ground that is below the BFE? If yes, when will fill be placed? mm/dd/yyyy * If yes, Endangered Species Act (ESA) compliance must be documented to FEMA prior to issuance of the CLOMR-F determination (please refer page 4 to the MT-1 instructions). Street Address of the Property (if request is for multiple structures or units, please attach additional sheet referencing each address and enter street names below): 408, 411, 412, 415, 416, 420, 501, 504, 508, 512 & 516 Spanish Walk Place NW, Albuquerque, NM Legal description of Property (Lot, Block, Subdivision or abbreviated description from the Deed): Spanish Walk Place, City of Albuquerque, Bernalillo County, NM Are you requesting that a flood zone determination be completed for (check one): Structures on the property? What are the dates of construction? A portion of land within the bounds of the property? (A certified metes and bounds description and map of the area to be removed, certified by a licensed land surveyor or registered professional engineer, are required. For the preferred format of metes and bounds descriptions, please refer to the MT-1 Form 1 Instructions.) The entire legally recorded property? Is this request for a (check one): Single structure Single lot Multiple structures (How many structures are involved in your request? List the number: Multiple lots (How many lots are involved in your request? List the number: 14

n addition to this form (MT-1 Form 1), please complete the checklist below. ALL requests must include one copy of the following:					
Copy of the effective FIRM panel on which the structure and/or property location has been accurately plotted (property inadvertently located in the NFIP regulatory floodway will require Section B of MT-1 Form 3)					
Copy of the Subdivision Plat Map for the property (with recordation data and stamp of the Recorder's Office) OR					
Copy of the Property Deed (with recordation data and stamp of the Recorder's Office), accompanied by a tax assessor's map or other certified map showing the surveyed location of the property relative to local streets and watercourses. The map should include at least one street intersection that is shown on the FIRM panel.					
Form 2 – Elevation Form. If the request is to remove the structure, and an Elevation Certificate has already been completed for this property, it may be submitted in lieu of Form 2. If the request is to remove the entire legally recorded property, or a portion thereof, the lowest lot elevation must be provided on Form 2.					
Please include a map scale and North arrow on all maps submitted.					
For LOMR-Fs and CLOMR-Fs, the following must be submitted in addition to the items listed above: Form 3 – Community Acknowledgment Form					
For CLOMR-Fs, the following must be submitted in addition to the items listed about	ove:				
Documented ESA compliance, which may include a copy of an Incidental Take Permit, an Incidental Take Statement, a "not likely to adversely affect" determination from the National Marine Fisheries Service (NMFS) or the U.S. Fish and Wildlife Service (USFWS), or an official letter from NMFS or USFWS concurring that the project has "No Effect" on proposed or listed species or designated critical habitat. Please refer to the MT-1 instructions for additional information.					
Please do not submit original documents. Please retain a copy of all su	abmitted documents for your records.				
DHS-FEMA encourages the submission of all required data in a digital f submissions help to further DHS-FEMA's Digital Vision and also may fa	ormat (e.g. scanned documents and images on Compact Disc [CD]). Digital cilitate the processing of your request.				
Incomplete submissions will result in processing delays. For additional information regarding this form, including where to obtain the supporting documents listed above, please refer to the MT-1 Form Instructions located at http://www.fema.gov/plan/prevent/fhm/dl_mt-1.shtm.					
$\begin{tabular}{ll} \textit{Processing Fee} \end{tabular} (see instructions for appropriate mailing address; or visit schedule) \end{tabular}$	http://www.fema.gov/fhm/frm_fees.shtm for the most current fee				
Revised fee schedules are published periodically, but no more than once lot(s)/structure(s) LOMAs are fee exempt. The current review and process					
Check the fee that applies to your request:					
\$325 (single lot/structure LOMR-F following a CLOMR-F)					
\$425 (single lot/structure LOMR-F)					
\$500 (single lot/structure CLOMA or CLOMR-F)					
\$700 (multiple lot/structure LOMR-F following a CLOMR-F, or multiple lot/structure CLOMA)					
\$800 (multiple lot/structure LOMR-F or CLOMR-F)					
Please submit the Payment Information Form for remittance of applicable fees. Please make your check or money order payable to:					
National Flood Insurance Program.					
All documents submitted in support of this request are correct to the best of my or imprisonment under Title 18 of the United States Code, Section 1001.	knowledge. I understand that any false statement may be punishable by fine				
Applicant's Name (required): Scott Ashcraft	Company (if applicable): Las Ventanas NM, Inc.				
Mailing Address (required):	Daytime Telephone No. (required): (505) 600-3377				
8330-A Washington Place, NE Albuquerque, NM 87113					
E-Mail Address (optional): By checking here you may receive correspondence electronically at the email address provided):	Fax No. (optional):				
Date (required)	Signature of Applicant (required)				

DEPARTMENT OF HOMELAND SECURITY - FEDERAL EMERGENCY MANAGEMENT AGENCY ELEVATION FORM

O.M.B. NO. 1660-0015 Expires February 28, 2014

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This form must be completed for rec Flood Insurance Program (NFIP) Ele		•				veyor. A DHS - FEMA National	
For requests to remove a structure on natural grade OR on engineered fill from the Special Flood Hazard Area (SFHA), submit the lowest adjacent grade (the lowest ground touching the structure), <i>including an attached deck or garage</i> . For requests to remove an entire parcel of land from the SFHA, provide the lowest lot elevation; or, if the request involves an area described by metes and bounds, provide the lowest elevation within the metes and bounds description. All measurements are to be rounded to nearest tenth of a foot. In order to process your request, all information on this form must be completed <i>in its entirety</i> . Incomplete submissions will result in processing delays.							
1. NFIP Community Number:	350002 ^{Propert}	y Name or Addr	ess:Spanish \	Nalk Place,	Albuquerq	ue, New Mexico	
2. Are the elevations listed be		_	_				
3. For the existing or proposed crawl space			re the types of connclosure other (ll that apply)		
4. Has DHS - FEMA identified t If yes, what is the date			dence or uplift? (se / (month/y		Yes No		
 What is the elevation datur If any of the elevations liste (FIRM) (e.g., NGVD 29 or NA 	ed below were co	omputed using a as the conversion	datum different th		for the effective F	Flood Insurance Rate Map	
Please provide the Latitude	dicate Datum: and Longitude o	of the most upst WGS84 the most upst	ream edge of the <i>s</i> t NAD83 NAD27	tructure (in decima Lat roperty (in decimal	Long degrees to the ne	arest fifth decimal place):	
Address	Lot Number	Block Number	Lowest Lot Elevation*	Lowest Adjacent Grade To Structure	Base Flood Elevation	BFE Source	
115 Spanish Walk Pl., NW	1		4982.0	4982.7	4981	FIRM Map 35001C01119G	
111 Spanish Walk Pl., NW	2		4981.8	4982.6	4981	FIRM Map 35001C01119G	
This certification is to be signed and information. All documents submitt by fine or imprisonment under Title	ed in support of th	nis request are cor	rect to the best of my	-	tand that any false s	tatement may be punishable	
Certifier's Name: Asa Nilsson-Weber			License No.: 17631		Expiration Date	Expiration Date: 12/31/2025	
Company Name: Tele		Telephone No.: 505-268-8828					
Email: asaw@iacivil.com		F	Fax No. N/A			Marian I C C Colling	
Signature: Qua (Wilsson-Webel)			Date: 03/25/2025			MEX MEX	
* For requests involving a portion of the metes and bounds description. Please note: If the Lowest Adjacent will be issued for the structure only	property, include t Grade to Structui	J		rmination		SE CO CO	

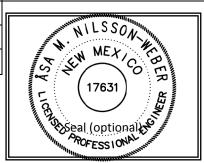
Continued from Page 1.						
Address	Lot Number	Block Number	Lowest Lot Elevation*	Lowest Adjacent Grade To Structure	Base Flood Elevation	BFE Source
408 Spanish Walk Pl., NW	Lot 6		4981.5	4983.1	4981	FIRM Map 35001C01119G
412 Spanish Walk Pl., NW	Lot 7		4981.6	4983.3	4981	FIRM Map 35001C01119G
416 Spanish Walk Pl., NW	Lot 8		4981.9	4983.4	4981	FIRM Map 35001C01119G
420 Spanish Walk Pl., NW	Lot 9		4982.0	4983.8	4981	FIRM Map 35001C01119G
504 Spanish Walk Pl., NW	Lot 10		4981.8	4983.5	4981	FIRM Map 35001C01119G
508 Spanish Walk Pl., NW	Lot 11		4981.6	4983.2	4981	FIRM Map 35001C01119G
512 Spanish Walk Pl., NW	Lot 12		4981.4	4982.9	4981	FIRM Map 35001C01119G
516 Spanish Walk Pl., NW	Lot 13		4981.2	4982.2	4981	FIRM Map 35001C01119G
501 Spanish Walk Pl., NW	Lot 17		4981.8	4982.8	4981	FIRM Map 35001C01119G
N/A Spanish Walk Pl., NW	Tract PR		4981.2	N/A	4981	FIRM Map 35001C01119G
N/A Spanish Walk Pl., NW	Tract C		4982.3	N/A	4981	FIRM Map 35001C01119G
N/A Spanish Walk Pl., NW	Tract D		4982.3	N/A	4981	FIRM Map 35001C01119G

This certification is to be signed and sealed by a licensed land surveyor, registered professional engineer, or architect authorized by law to certify elevation information. All documents submitted in support of this request are correct to the best of my knowledge. I understand that any false statement may be punishable by fine or imprisonment under Title 18 of the United States Code, Section 1001.

Certifier's Name:	License No.:
Asa Nilsson-Weber	17631
Company Name:	Telephone No.:
Isaacson & Arfman, Inc.	505-268-8828
Email:	Fax No.
asaw@iacivil.com	N/A
Signature: Qua Wilsson-Woldel	Date: 03/25/2025

* For requests involving a portion of property, include the lowest ground elevation within the metes and bounds description.

Please note: If the Lowest Adjacent Grade to Structure is the only elevation provided, a determination will be issued for the structure only.



Expiration Date: 12/31/2025

DEPARTMENT OF HOMELAND SECURITY - FEDERAL EMERGENCY MANAGEMENT AGENCY COMMUNITY ACKNOWLEDGMENT FORM

O.M.B. NO. 1660-0015 Expires February 28, 2014

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This form must be completed for requests involving the existing or proposed placement of fill (complete Section A) OR to provide acknowledgment of this request to remove a property from the SFHA which was previously located within the regulatory floodway (complete Section B). This form must be completed and signed by the official responsible for floodplain management in the community. The six digit NFIP community number and the subject property address must appear in the spaces provided below. Incomplete submissions will result in processing delays. Please refer to the MT-1 instructions for additional information about this form. Property Name or Address: Spanish Walk Place Community Number: 350002 A. REQUESTS INVOLVING THE PLACEMENT OF FILL As the community official responsible for floodplain management, I hereby acknowledge that we have received and reviewed this Letter of Map Revision Based on Fill (LOMR-F) or Conditional LOMR-F request. Based upon the community's review, we find the completed or proposed project meets or is designed to meet all of the community floodplain management requirements, including the requirement that no fill be placed in the regulatory floodway, and that all necessary Federal, State, and local permits have been, or in the case of a Conditional LOMR-F, will be obtained. For Conditional LOMR-F requests, the applicant has or will document Endangered Species Act (ESA) compliance to FEMA prior to issuance of the Conditional LOMR-F determination. For LOMR-F requests, I acknowledge that compliance with Sections 9 and 10 of the ESA has been achieved independently of FEMA's process. Section 9 of the ESA prohibits anyone from "taking" or harming an endangered species. If an action might harm an endangered species, a permit is required from U.S. Fish and Wildlife Service or National Marine Fisheries Service under Section 10 of the ESA. For actions authorized, funded, or being carried out by Federal or State agencies, documentation from the agency showing its compliance with Section 7(a)(2) of the ESA will be submitted. In addition, we have determined that the land and any existing or proposed structures to be removed from the SFHA are or will be reasonably safe from flooding as defined in 44CFR 65.2(c), and that we have available upon request by DHS-FEMA, all analyses and documentation used to make this determination. For LOMR-F requests, we understand that this request is being forwarded to DHS-FEMA for a possible map revision. **Community Comments:** Community Official's Name and Title: (Please Print or Type) Telephone No.: Anthony Montoya, Jr. 505-924-3314 Community Official's Signature: (required) Community Name: Date: 4/4/2025 anth Mars City of Albuquerque **B. PROPERTY LOCATED WITHIN THE REGULATORY FLOODWAY** As the community official responsible for floodplain management, I hereby acknowledge that we have received and reviewed this request for a LOMA. We understand that this request is being forwarded to DHS-FEMA to determine if this property has been inadvertently included in the regulatory floodway. We acknowledge that no fill on this property has been or will be placed within the designated regulatory floodway. We find that the completed or proposed project meets or is designed to meet all of the community floodplain management requirements. **Community Comments:** Community Official's Name and Title: (Please Print or Type) Telephone No.: Community Name: Community Official's Signature (required): Date:

FEDERAL EMERGENCY MANAGEMENT AGENCY PAYMENT INFORMATION FORM

Community Name: Project Identifier:					
THIS FORM MUST BE MAILED, ALONG WITH THE APPROPRIATE FEE, TO THE ADDRESS BELOW OR FAXED TO THE FAX NUMBER BELOW.					
Please make check or money	order payable to the National I	Flood Insurance Program.			
Type of Request:	MT-1 application MT-2 application	LOMC Clearinghouse 847 South Pickett Street Alexandria, VA 22304-4605 Attn.: LOMC Manager			
	☐ EDR application }	FEMA Project Library 847 South Pickett Street Alexandria, VA 22304-4605 FAX (703) 212-4090			
Request No. (if known):	Check No.:		Amount:		
☐ INITIAL FEE* ■ FINAL I	FEE FEE BALANCE** M	NASTER CARD VISA CHECK	MONEY ORDER		
*Note: Check only for EDR and/or Alluvial Fan requests (as appropriate). **Note: Check only if submitting a corrected fee for an ongoing request.					
COMPLETE THIS SECTION ONLY IF PAYING BY CREDIT CARD					
	CARD NUMBER		EXP. DATE		
1 2 3 4 5	6 7 8 9 10 11	12 13 14 15 16	Month Year		
 Date		Signature			
NAME (AS IT APPEARS ON CA (please print or type)	RD):	-			
ADDRESS: (for your credit card receipt-please print or type) DAYTIME PHONE:		_			