

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

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

30001018

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:

BUILDING OWNER'S NAME MARK J. WOLF		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 6041 E. HIGHWAY 388		Company NAIC Number	
CITY YOUNGSTOWN	STATE FLORIDA	ZIP CODE 32466	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) COM. AT SW COR. OF SW 1/4 OF NW 1/4 OF SEC. 21, T1S, R 13W.			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL			
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-##" or ##.####)		HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER BAY COUNTY 120004		B2. COUNTY NAME BAY "UNINCORPORATED AREA"		B3. STATE FL	
B4. MAP AND PANEL NUMBER 120004 0125	B5. SUFFIX D	B6. FIRM INDEX DATE 9-20-96	B7. FIRM PANEL EFFECTIVE/REVISED DATE JANUARY 3, 1986	B8. FLOOD ZONE(S) A & C	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 24' PJP 2/27/01

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 5 (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 C3a-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 1929 Conversion/Comments

Elevation reference mark used USC&GS TT 35C1 Does the elevation reference mark used appear on the FIRM?  Yes  No

<input checked="" type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>29</u> . <u>5</u> ft.(m)
<input type="checkbox"/> b) Top of next higher floor	<u>N/A</u> . <u>   </u> ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>N/A</u> . <u>   </u> ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	<u>N/A</u> . <u>   </u> ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>N/A</u> . <u>   </u> ft.(m)
<input checked="" type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>15</u> . <u>2</u> ft.(m)
<input checked="" type="checkbox"/> g) Highest adjacent grade (HAG)	<u>19</u> . <u>4</u> ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>N/A</u>
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	<u>N/A</u> sq. in. (sq. cm)

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 ALFONSO TUZINKIEWICZ	LICENSE NUMBER 2433
TITLE PRESIDENT	COMPANY NAME A.T. SURVEY INC.
ADDRESS 2204 W. 24TH STREET	CITY PANAMA CITY
SIGNATURE 	STATE FLORIDA
	ZIP CODE 32405
	DATE 11-10-00
	TELEPHONE (850) 763-6471