## FILE

## NATIONAL FLOOD INSURANCE PROGRAM

Expires July 31, 2002

**ELEVATION CERTIFICATE** 

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	SECTION A - PR	OPERTY OWNER INFORMA	TION	For insurance Company Use:
BUILDING OWNER'S NAME				Policy Number
JONATHON MASKER BUILDING STREET ADDRESS (Including A 5209 GULF DRIVE	Apt., Unit, Suite, and/or	Bldg. No.) OR P.O. ROUTE AND	BOX NO.	Company NAIC Number
CITY PANAMA CITY BEACH		STATE		ZIP CODE 32408
PROPERTY DESCRIPTION (Lot and Block	Numbers, Tax Percol N	lumber, Legal Description, etc.)	······································	**************************************
BUILDING USE (e.g., Residential, Non-resi	LACCON BEACH		15	······································
RESIDENTIAL	dential, Addition, Access	sory, etc. Use Comments section	H DECESSERY.)	
LATITUDE/LONGITUDE (OPTIONAL)	HORIZONTAL	DATUM: SOURCE: [	GPS (Type):	**************************************
(##"-##-####" or ##.#####")	X_  NAD 1927	NAD 1983	USGS Quad Mar	>Other:
SEG	TION B - FLOOD IN:	SURANCE RATE MAP (FIRM	) INFORMATION	
BI, NEIP COMMUNITY NAME & COMMUN	i	COUNTY NAME		B3. STATE
120004 0320 (UNINCORPORA		BAY		<u> </u>
B4, MAP AND PANEL B3. SUFFIX	BG. FIRM INDEX	B7. FIRM PANEL	B& FLOOD	B9, BASE FLOOD ELEVATION
MUMBER 120004 0320 D	DATE 01/03/86	EFFECTIVE/REVISED DATE	ZONE(S) A8/V7	(Zone AO, use dapth of Booding
B10. Indicate the source of the Base Flo		Ata of base flood death enter		LAS=7 FEET, V7=8 FEET
FIS Frome   XI FIRM		Determined L_{ Other (De		
B11. Indicate the elevation datum used		<del></del> , ,	,	escribe):
B12. Is the building located in a Coastal				
Designation Date:				
SECTIO	N C - BUILDING EL	EVATION INFORMATION (S	URVEY REQUIR	ED)
C1. Building elevations are based on: [		<del>/////////////////////////////////////</del>	······································	MFinished Construction
*A new Elevation Certificate will be				The state of the state of
C2. Building Diagram Number _1{S	•	<del>-</del> .		certificate is being completed - s
pages 6 and 7. If no diagram accur			-	
C3. Elevations Zones A1-A30, AE, AH	, A (with BFE), VE, V	1-V30, V (with BFE), AR, ARU	A, AR/AE, AR/A1	-A30, AR/AH, AR/AO
Complete items C3e-i below accord	_			
the datum used for the BFE in Secti				
calculation. Use the space provided		ea of Section IJ or Section G,	as appropriate, t	o document the datum conversion
Datum <u>N.G.V.D.</u> Conversion/ Elevation reference mark used		Does the elevation reference r	nack used uppea	rantha CIDII? I I Vae i il
a) Top of bottom floor (Including)	· · · · · · · · · · · · · · · · · · ·		. 22fl.(m) ≡ [	ron the FIRM? [ ] Yes [ ] ]
Lib) Top of next higher floor	DESCRIPTION CHOOSES	NA .	ft.(m)	. /
C c) Bottom of knwest horizontal str	uctural member (V zo	****	ft.(m)	7/31/01
Q d) Attached garage (top of slab)			43ft.(m)	, ,
e) Lowest elevation of machinery	and/or equipment		10 8   V 6	1/31/01
servicing the building $A/C$	PAD	<del></del>	_ggft.(m) 農養	
I) Lowest adjacent grade (LAG)		13	_4_fL(m) Z∰	$\sim$
🗓 g) Highest adjacent grade (HAG)			8 ft.(m) g"	//\
☐ h) No. of permanent openings (fi		T	2 \$	$\mathcal{A}$
Li i) Total area of all permanent ope	anings (Nood vents) in	i C34) 6q. in.	(8d. cm)	
SECTI	ON D - SURVEYOR,	ENGINEER, OR ARCHITEC	CERTIFICATIO	N
This certification is to be signed and se	aled by a land survey	or, engineer, or architect auth	orized by law to e	zatify elevation information.
I certify that the information in Sections	A, B, and C on this c	ortificato represents my best d	afforts to hyterpre	t the data available.
i understand that any false statement n	nay be punishable by			tion 1001.
CERTIFIER'S NAME			NSE NUMBER	
TILL W. MINKIVEN	<del></del>	COMPANY NAME		13 y
ADDRESS A				YING, IN CODE
SIGNATURE NOTELY SY ROAD,				
SIGNATURE		PANAMA CITY-BEI	TELEPHO	NE ~~4V0
77722 F			850_23	

MPORTANT: In these spaces, copy the	For Insurance Company Use:		
3UILDING STREET ADDRESS (Including Apt., I 5209 GULF LAGOON DRTVE	Unit, Suite, end/or Bidg. No.) OR P.O.	ROUTE AND BOX NO.	Policy Number
PANAMA CITY BEACH,	STATE FI.	ZIP CODE	Company NAIC Number
	IVEYOR, ENGINEER, OR ARCH	32408 ITECT CERTIFICATION (CON	
WINDLE 12/1 - 12/1 - 12/1/1/1/1 - 12/1/1/1/1 - 12/1/1/1/1 - 12/1/1/1/1 - 12/1/1/1/1 - 12/1/1/1/1 - 12/1/1/1 - 12/1/1/1 - 12/1/1/1 - 12/1/1/1 - 12/1/1/1 - 12/1/1/1 - 12/1/1/1 - 12/1/1/1 - 12/1/1/1 - 12/1/1/1 - 12/1/1/1/1 - 12/1/1/1/1/1/1/1 - 12/1/1/1/1 - 12/1/1/1/1/1 - 12/1/1/1/1/1 - 12/1/1/1/1 -			
Copy both sides of this Elevation Certificate	ica (1) contituinty official, (2) [[[	mauca aftaincombana, aun fo	) bullary owner.
		——————————————————————————————————————	
		: « <del></del>	Check here if attachm
SECTION E - BUILDING ELEVATION !	INFORMATION (SURVEY NOT	REQUIRED) FOR ZONE AO A	
or Zone AO and Zone A (without BFE), con		e Elevation Certificate is Intend	ed for use as supporting
formation for a LOMA or LOMR-F, Section	•		
<ol> <li>Building Diagram Number(Select see pages 6 and 7. If no diagram accura</li> </ol>			ertificate is being completed.
2. The top of the bottom floor (including bar			(cm) I Labove or I I hal
(check one) the highest adjacent grade.			(Au) Llannen Lloa
3. For Building Diagrams 6-8 with openings		or or elevated Noor (elevation b	) of the building is
ft.(m)in.(cm) above the high			
4. For Zone AO only. If no flood depth num	•		
floodplain management ordinance? [_ [ ]	PERTY OWNER (OR OWNER'S		
he property owner or owner's authorized no		<del></del>	<u></u>
ommunity-issued BFE) or Zone AO must s	·	(8.415 A, U, and L (0: 22) 18 A (F	THE POST OF LANCE PROPERTY OF
ROPERTY OWNER'S OR OWNER'S AUTHOR	IZED REPRESENTATIVE'S NAME		<
DORESS	CITY	STATE	Z行 CODE
RONATURE	DATE	TELEPH	DNE
COMMENTS	adament - ann aadament - an de are a		*
	and the second s	К >	
CE	CTION G - COMMUNITY INFOR	MATION (DETICINAL)	Check here if attachme
e local official who is authorized by law or o	· ·		ctilidades can complete
ections A, B, C (or E), and G of this Elevation			condition and politices
I. [_] The information in Section C was tak	en from other documentation that	t has been signed and emboss	
engineer, or architect who is authoriz	-	elevation information. (Indicat	e the source and date of the
elevation data in the Comments area	•	a a duithaut a CCUA lessad as	annountly instead OFC) as
<ol> <li>L_I A community official completed Sections</li> <li>Zone AO.</li> </ol>	ion is for a pulking located in Zon	A A (WILDOUT & PEMA-165UED OF	COUNTRY-189 ABO BY E) OL
), [] The following information (Items G4-0	G9) is provided for community flor	odplein management purposes	
G4. PERMIT NUMBER G5. DAT	E PERMIT ISSUED	G6. DATE CERTIFICATE OF	COMPLIANCE/OCCUPANCY
. This permit has been issued for.	lew Construction     Substanti	al improvement	
. Elevation of as-built lowest floor (including		*	ft.(m) Datum:
BFE or (in Zone AO) depth of flooding at t			A.(m) Dalum:
OCAL OFFICIAL'S NAME	717	NE	
OMMUNITY NAME	TE	LEPHONE	makstern - halling - maining - may the maining - maining
GNATURE	()	TE	#####################################
OMMENTS		, p	
A 100 CO	wa wana ayaa waa ayaa ayaa ayaa ayaa a		I Chaok been id -44
			Check here if attachmen
		EST TO A T	upmomu os e i orumumia dipm <u>u</u> e em erroma amilimu <del>e a</del>