

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3087-0077 Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: Policy Number BUILDING OWNER'S NAME DAVID GARNER BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg, No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number 535 MILLS LANE STATE ZIP CODE CITY FLORIDA 32404 PANAMA CITY PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcet Number, Legal Description, etc.) BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL HORIZONTAL DATUM: SOURCE (GPS (Type): LATITUDE/LONGITUDE (OPTIONAL) ##" - ##" - ## ##" OF ## #####") NAD 1927 ___ NAD 1983 USGS Quad Map SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1, NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** B3. STATE FLORIDA N/A B6. FIRM INDEX B4, MAP AND PANEL **B7. FIRM PANEL** BS. FLOOD 89. BASE FLOOD ELEVATION(S) **B5. SUFFIX** EFFECTIVE/REVISED DATE ZONE(S) DATE (Zone AO, use depth of flooding) NUMBER 1/3/86 120004 0370 D 9/20/96 AS B10, Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. ___ Community Delamined | X | FIRM |___| Other (Describe): 811, Indicate the elevation datum used for the BFE in B9: (X_I NGVD 1929 ____ NAVD 1988 ____ Other (Describe): B12, is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? | LLI Yes. Designation Date: SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: [__]Construction Drawings* _____|Building Under Construction* Y Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number __6 __ (Salect the building diagram most similar to the building for which this cartificate 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. Stats 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. Conversion/Comments RM_56_ Does the elevation reference mark used appear on the FIRM? | g| Yes | | | No Elevation reference mark used a) Top of bottom floor (including basement or enclosure) 12 . 2 ft.(1/m) b) Top of next higher floor. ft.(m) c) Bottom of lowest horizontal structural member (V zones only) ft.(m) 5 t.(M) d) Attached garage (top of slab). e) Lowest elevation of machinery and/or equipment 7 5 A.(M) servicing the building ☐ f) Lowest adjacent grade (LAG) 4 . B ft.(M) g) Highest adjacent grade (HAG). <u> 6 . 山</u> fl.(៣) h) No. of parmanent openings (flood vents) within 1 ft. above adjacent grade i) Total area of all permanent openings (flood vents) in C3h ____ 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 1901. **UCENSE NUMBER** CERTIFIER'S NAME FLORIDA LAND SURVEYOR NO. 4962 RUSSELL S. WARD COMPANY NAME PROFESSIONAL SURVEYOR AND MAPPER WARD LAND SURVEYING, INC. STATE ZIP CODE FL PANAMA CITY 32405 TELEPHONE (850) 769-8209 4/17/01 SEE REVERSE SIDE FOR CONTINUATION REPLACES ALL PREVIOUS EDITIONS FEMA Form 81-31, AUG 89

		[==] == == 11= *:
IMPORTANT: In these spaces, c	opy the corresponding information from Section A. ling Apt., Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO	For Insurance Company Use: Policy Number
BOILDING STREET ADDRESS INCIDE	mily right, cont., duties, animosis body, and, and a record contains married	· · · · · · · · · · · · · · · · · · ·
CITY	STATE	P CODE Company NAIC Number
SECTION	D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION	ON (CONTINUED)
Copy both sides of this Elevation C	Certificate for (1) community official, (2) Insurance agent/compan	ly, and (3) building owner.
COMMENTS		
		трин в денти при в
A WALL A SCHOOL AND A SCHOOL AN		**************************************
		Check here if attachmen
	VATION INFORMATION (SURVEY NOT REQUIRED) FOR ZOI	
	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 wham accurately represents the building, provide a sketch or photo	ment)
		olin.(cm)
(check one) the highest adjacer	nt grade.	
	openings (see page 7), the next higher floor or elevated floor (el	levation b) of the building is
[[ft.(m)] [jin.(cm) abo	we the highest adjacent grads.	in passadases with the consistence to
E4. For Zone AU only: If no flood of	lepth number is available, is the top of the bottom floor elevated noe? Yes No Unknown. The local official must re-	certify this information in Section G.
	F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE)	
	horized representative who completes Sections A, B, and E for	
community-issued BFE) of Zone A		
DECRETY MANUER'S OR MANUER'S	AUTHORIZED REPRESENTATIVE'S NAME	
	CITY	STATE ZIP CODE
ADDRESS		
SIGNATURE	DATE	TELEPHONE
COMMENTS	Ambinistic Control of	
**************************************	**************************************	Check here if attachmer
	SECTION G - COMMUNITY INFORMATION (OPTIONAL	
The total official wing is authorized b	y law or ordinance to administer the community's floodplain ma	······································
Sections A. B. C (or E), and G of this	is Elevation Certificate. Complete the applicable item(s) and sign	n below,
G1. The information in Section (C was taken from other documentation that has been signed and	d embossed by a licensed surveyor,
	is authorized by state or local law to certify elevation information	. (Indicate the source and date of the
elevation data in the Comm	nents area below.) eted Se ction E for a building located in Zone A (wilhout a FEMA	issued or community-issued BEP) or
Zone AO.	etta dectoli I. ita a panani ioratea ili zpile vi (winont a . cun o	Sound of dolymanity toolood of they of
	tems 04-G9) is provided for community floodplain management	purposes.
G4. PERMIT NUMBER	1	ICATE OF COMPLIANCE/OCCUPANCY
	ISSUED	
G7. This permit has been issued for	: New Construction Substantial Improvement r (including basement) of the building is:	ft.(m) Datum:
G9. BFE or (in Zone AO) depth of file	ooding at the building site is:	ft.(m) Datum;
LOCAL OFFICIAL'S NAME	TILE	
COMMUNITY NAME	TELEPHONE	·-
SIGNATURE	DATE	
COMMENTS		A CONTRACTOR OF THE PROPERTY O
w	to 4 The second of the second	
The state of the s	a contraction of the contraction	Check here if attachmen
Frida Corm 04 24 AUG DO		REPLACES ALL PREVIOUS EDITION
FEMA Form 81-31, AUG 99		THE CHAMPASIES TO SECTION OF THE SEC



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MDORTANT: In Maga spaces con	y the corresponding information from Sc	ection A.	For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg, No.) OR P.O. ROUTE AND BOX NO.			Policy Number
	· -		
CITY	STATE	ZIP CODE	Company NAIC Number
SECTION D	SURVEYOR, ENGINEER, OR ARCHITEC	T CERTIFICATION (CON	TINUED) .
Copy both sides of this Elevation Cert	ificate for (1) community official, (2) insuran	ce agent/company, and (3) building owner.
COMMENTS	· ·	* ************************************	

	•		
			Check here if attachments
SECTION E - BUILDING ELEVAT	TION INFORMATION (SURVEY NOT REG	UIRED) FOR ZONE AO A	The state of the s
), complete Items E1 through E4. If the Ele	**************************************	# **
information for a LOMA or LOMR-F, Se			out to the day appearing
E1, Building Diagram Number(Select the building diagram most similar to t	he building for which this o	ertificate is being completed
see pages 6 and 7. If no diagram	accurately represents the building, provide	a skeich or photograph.)	
	ng basement or enclosure) of the building is	i	woled [above or below
(check one) the highest adjacent g	rade,		3 - F.M. 3 - T.D. 4
	enings (see page 7), the next higher floor or	· Bievated Noor (elevation t	i) of the building is
I I fl.(m) I lin.(cm) above	the nighest abjacent grade. In number is available, is the top of the botto	om flant elevated in accom	lance with the community's
floodplain management ordinance			
	PROPERTY OWNER (OR OWNER'S RES		
	ized representative who completes Section:		
community-issued BFE) or Zone AO r		*	
	THE ASSESSMENT OF STREET		- Addition
PROPERTY OWNER'S OR OWNER'S AL	ITHORIZED REPRESENTATIVE'S NAME		
ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPH	ONE
COMMENTS	The second secon	**************************************	
		####*********************************	#==>>>
			Check here if attachments
	SECTION G - COMMUNITY INFORMA		
	aw or ordinance to administer the communit		t ordinance can complete
Sections A, B, C (or E), and G of this E	levation Certificate. Complete the applicable ras taken from other documentation that has	e stem(5) and sign below. Chood signed and emboss	and by a licensed surveyor
G1. [] The information in Section C w	uthorized by state or local law to certify elements.	s bean signed and emboss vation information. (Indice	te the source and date of the
elevation data in the Comman			
GZ. I A community official completes	d Section E for a building located in Zone A	(without a FEMA-issued o	r community-issued 9FE) or
Zone AO,	•		
G3. [_] The following information (item	is G4-G9) is provided for community floodpl		
G4. PERMIT NUMBER G		GG. DATE CERTIFICATE OF SSUED	COMPLIANCE/OCCUPANCY
C7 This paper they have forward for	New Construction Substantial		
G8. Elevation of as-built lowest floor (in			ft.(m) Datum:
G9. BFE or (in Zone AO) depth of flood			ft.(m) Datum:
LOCAL OFFICIAL'S NAME	TITLE		
		?HONE	
COMMUNITY NAME			
SIGNATURE	DATE		
COMMENTS			
THE STATE OF THE S			A SAME AND
			Check here if attachments
FEMA Form 81-31, AUG 99	A A A A A A A A A A A A A A A A A A A	REPLA	CES ALL PREVIOUS EDITIONS