FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077

B 01 00349

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** KTM MURPHY Company NAIC Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO. 电对象操作 机分解点 5603 S LAGOON DR STATE ZIP CODE CITY FL 32408 PANAMA CITY BEACH PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 12 BLOCK R, BILIMORE BEACH BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: LIGPS (Type): (##" - ##" - ##.##" or ##.####") ____ NAD 1983 | __ NAD 1927 USGS Quad Map SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B1. NEIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME** B3. STATE FL BAY 120004 0320 D (UNINCORPORATED AREAS) B4, MAP AND PANEL **B5. SUFFIX 06. FIRM INDEX B7. FIRM PANEL** BB. FLOOD B9. BASE FLOOD ELEVATION(S EFFECTIVE/REVISED DATE ZONE(5) NUMBER DATE (Zone AO, use depth of flooding) 1/3/86 120004 0320 B10, Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B0. [__] Community Determined FIRM ____ Other (Describe): _ B11, indicate the elevation datum used for the BFE in B9; K_ NGVD 1929. [__] NAVO 1988. [__] Other (Deacribe): B12, is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🔝 Yes Designation Date: SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: L_IConstruction Drawings* | X | Building Under Construction* I IFinished Construction *A new Elevation Certificate will be required when construction of the building is complets. CZ. Building Diagram Number ______ (Select the building diagram most similar to the building for which this cartificate is being completed - se 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 expropriate, to document the datum conversion Conversion/Comments Elevation reference mark used TEM Does the elevation reference mark used appear on the FIRM? a) Top of bottom floor (including basement or enclosure) 9_.04_fl.(m) □ b) Top of next higher floor NA . fl.(m) c) Bottom of lowest horizontal structural member (V zones anily) NA . ft,(m) (dele fo qof) agarage (top of slab) <u>7_ .56_</u> ft.(m) a) Lowest glevation of machinery and/or equipment NA servicing the building ft.(m) I) Lowest adjacent grade (LAG). 5 .10 fl.(m) g) Highest adjacent grade (HAG) 7_ 6Q_ fl.(m) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade i) Total area of all permanent openings (flood vents) in C3h _ sq. in. (eq. 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. t 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 P.S.M. MICHAEL W. MONGOVEN COMPANY NAME TITLE PRESIDENT BRUNER-MONGOVEN APPRESS PANAMA-CITY BEACH PARKWAY , Panama city beach. FL SIGNATURE DATE TELEPHONE <u>05/10/01</u> 850-235-2293 FEMA Form 81-32, AUG 99 SEE REVERSE SIDE FOR CONTINUATION REPLACES ALL PREVIOUS EDITIONS

	opy the corresponding information from		For Insurance Company Use:
BUILDING STREET ADDRESS (Included 5603 S LAGOON DR	ing Apt., Unit, Suite, and/or Bldg. No.) ÖR P.O. I		Policy Number
CITY PANAMA CITY BEACH,	FL STATE	32408 ZIP CODE	Company NAIC Number
SECTION	D - SURVEYOR, ENGINEER, OR ARCHIT	TECT CERTIFICATION (COM	ITINUED)
Copy both sides of this Elevation C	ertificate for (1) community official, (2) insu	rance agent/company, and (3	3) building owner.
COMMENTS			

			Check here if attachment
	VATION INFORMATION (SURVEY NOT R		**************************************
For Zone AO and Zone A (without B information for a LOMA or LOMR-F)	SFE), complete items E1 through E4. If the Section C must be completed	Elevation Certificate is intend	ted for use as supporting
	_ (Select the building diagram most similar	to the building for which this	certificate is being completed -
	am accurately represents the building, provi	, , , , , ,	
E2. The top of the bottom floor (incl (check one) the highest adjaces	luding basement or enclosure) of the buildir of crade.)	n.(cm) <u>labove or lbelow</u>
E3, For Building Diagrams 6-8 with	openings (see page 7), the next higher floo	or or elevated floor (elevation)	b) of the building is
E4 For Zone AO only. If no fined d	wa the highest adjacent grade. lepth number is available, is the top of the b	oftom floor almodal in sever	dance with the communities
	nce? Yes No Unknown. Th		
SECTION	F - PROPERTY OWNER (OR OWNER'S	REPRESENTATIVE) CERTII	ICATION
• • •	horized representative who completes Sect	ions A, B, and E for Zone A (without a FEMA-issued or
community-issued BFE) or Zone A	O must sign here.		
PROPERTY OWNER'S OR OWNER'S	AUTHORIZED REPRESENTATIVE'S NAME	* #P****** * * * * * * * * * * * * * * *	
ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPH	ONE
COMMENTS			
	:		***************************************
The state of the s	SECTION G - COMMUNITY INFOR	MATION (OPTIONAL)	Check here if attachments
The local official who is authorized b	y law or ordinance to administer the comm		nt ordinance can complete
Sections A, B, C (or E), and G of this	s Elevation Certificate. Complete the applic	table item(s) and sign below.	•
	C was taken from other documentation that	_	
engineer, or architect who s elevation data in the Comm	is authorized by state or local law to certify nearly area below.)	elevanon information. (Indica	HE THE ROUTCH SHIP DESTRUCK DIS
	eted Section E for a building located in Zon-	e A (without a FEMA-issued o	r community-issued BFE) or
Zone AO.		(*-!	
	tems G4-G9) is provided for community floo		
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	GG. DATE CERTIFICATE OF	COMPLIANCE/OCCUPANCY
G7. This permit has been issued for.		al improvement	**************************************
	(including basement) of the building is:		ft.(m) Dalum:
G9. BFE or (in Zone AO) depth of flo		***************************************	_ ft.(m) Datum:
LOCAL OFFICIAL'S NAME		TLE	· · · · · · · · · · · · · · · · · · ·
COMMUNITY NAME		LEPHONE	
SIGNATURE	DA	πE	
COMMENTS	THE PROPERTY OF THE PROPERTY O	! S	F MA OS HUL 1005
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