

ELEVATION CERTIFICATE

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

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SECTION A - PROPERTY OWNER INFORMATION	For Insurance Company Use:		
BUILDING OWNER'S NAME PLOTERY & GAIL CLASDY	Policy Number		
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO.	Company NAIC Number		
9013 PECAN AVENUE			
YOUNGSTOKIN STATE FL	ZIP CODE 724 04		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)			
LOT 8, BLOCK A LAKESHOPE VEIGHTS			
BUILDING USE (e.g., Residential, Non-residential Addition, Accessory, etc. Use Comments section if necessary.)			
LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: L. J. GPS (Type):	*		
(##" - ## - ## ## or ## #####") LINAD 1927 LINAD 1983 USGS Quad Ma	p Other:		
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATIO	N .		
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER B2. COUNTY NAME	B3. STATE		
BAY COUNTY 120004 BAY	for the second s		
B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX B7. FIRM PANEL B8. FLOOD	B9. BASE FLOOD ELEVATION(S)		
NUMBER DATE EFFECTIVE/REVISED DATE ZONE(S) 12 000 4 0200 D 01/17/175 01/03/86 4-3	(Zone AO, use depth of flooding)		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.	U-U		
Fis Profile V FIRM Community Determined Other (Describe):			
B11, Indicate the elevation datum used for the BFE in B9: [V] NGVD 1929 NAVO 1988 Other (D	escribe):		
B12, le the building located in a Coastal Barrier Resources System (CBRS) area or Otherwisa Protected Ar	<u> </u>		
Designation Date;			
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIR	(ED)		
C1. Building elevations are based on: Construction Drawings* Mulding Under Construction*	Finished Construction		
*A new Elevation Certificate will be required when construction of the building is complete.	1		
C2. Building Diagram Number 1 (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/A			
Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum us			
The datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measured substitution. Use the cooperation of the Communication of Section C. do decreased in			
calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, Datum Nigy 5 1929 Conversion/Comments	to document the damm conversion.		
Elevation reference mark used RA > 3 Does the elevation reference mark used appear	er on the FIRM? Yes 10 No		
U a) Top of bottom floor (including basement or enclosure) 12 . 作 ft.(m) 東 (b) Top of twent bisher floor (including basement or enclosure) 12 . 作 ft.(m) 2			
☐ b) Top of next higher floor N/A . ft.(m) &			
ロ c) Bottom of lowest horizontal structural member (V zones only) N/A . ft.(m) 養養	\$ 55.71		
☐ d) Attached garage (top of slab)	7721		
a) Lowest elevation of machinary and/or equipment			
servicing the building	ashelia		
	04/25/02		
☐ g) Highest adjacent grade (HAG) ☐ 10 . ② ft.(m) # ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade ☐ ② ft.(m) # ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐			
U i) Total area of all permanent openings (flood vents) in C3h sq. in. (sq. cm)	Hosela Almes Andres		
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT GERTIFICATION			
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to	•		
I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret			
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Se CERTIFIER'S NAME 12 A LICENSE NUMBER			
NOGEN PLAIN ANGLIN	5521		
TITLE PROFESSIONAL SURVEYOR & MAPPER COMPANY NAME ANGLIN LI	THE SLIEVEYING		
ADDRESS ROL SAVANNAH DRIVE CITY PANAMA CITY STATE	F(ZP COOE 31 405		
SIGNATURE (// TE) EPHI	NE A		
Konj 3 - 6- 04/29/02	850.271-4055		
FERRY From 04 34 AVG 60 / OFF DESCRIPTION OF BUT FOR CONTINUE AT THE	ACCO ALL DOCUMENTO CONTIONIO		

IMPORTANT: In these spaces, o			For Insurance Company Use:
BUILDING STREET ADDRESS (Included Sold PECAN	AVENUE		Policy Number
VOUNDATONN _	STATE	ZIP COD 2. 32404	E Company NAIC Number
SECTION	D - SURVEYOR, ENGINEER, OF	ARCHITECT CERTIFICATION (CO	ONTINUED)
	,,,	i, (2) insurance agent/company, and	
COMMENTS		A	
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		······································	^^
NUMBER 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		лен при	
			Check here if attachments
		Y NOT REQUIRED) FOR ZONE AO	
•		4. If the Elevation Certificate is inte	nded for use as supporting
information for a LOMA or LOMR-F. E1. Building Dispress Number	•	st similar to the building for which thi	s redificate je being completed
		ing, provide a sketch of photograph.	
E2. The top of the bottom Roor (incl	luding basement or enclosure) of t		jin.(cm) above or below
(check one) the highest adjaces	_	and the state of t	_ LX all the _ to _ the _ to
	openings (see page 7), the next h ive the highest adjacent grade.	gher floor or elevated floor (élevatio	u nì oi tue brieding ie
		p of the bottom floor elevated in acco	ordance with the community's
floodplain management ordinar	nce? Yes No Unio	nown. The local official must certify I	this information in Section G.
······································		NER'S REPRESENTATIVE) CERT	
The property owner or owner's auticommunity-issued BFE) or Zone A		stes Sections A, B, and E for Zone A	(without a FEMA-issued or
Continuous y mandred by by 2010 /	er mast sign nerg,		
PROPERTY OWNER'S OR OWNER'S	AUTHORIZED REPRESENTATIVE'S	NAME	
ADDRESS		CITY STATI	ZIP CODE
SIGNATURE		DATE TELEP	PHONE
COMMENTS	**************************************		
		- A A A A A A A A A A A A A A A A A A A	
			Check here if attachments
		(INFORMATION (OPTIONAL)	
The local official who is authorized to Sections A, B, C (or E), and G of thi			
Sections A, B, C (or E), and G or thi G1. [] The information in Section (
engineer, or archited who	is authorized by state or local low (o certify elevation information. (Indi	
elevation data in the Comm		11. 5 A Z. W. X. ESAR C	l
G2. [] A community official compli Zone AO.	eted Section E for a building locate	d in Zone A (without a FEMA-issued	or community-lasued BFE) of
G3.) The following information (I	tems G4-G9) is provided for comm	ນກມ່າງ floodplain management purpod	ies.
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	· · · · · · · · · · · · · · · · · · ·	OF COMPLIANCE/OCCUPANCY
	•	ISSUED	
G7. This permit has been issued for	·	Substantial Improvement	A (m) Determ
G8. Elevation of as-built lowest floor G9. BFE or (in Zone AO) depth of flo	· -	ng 18:	ft.(m) Datum: ft.(m) Datum:
LOCAL OFFICIAL'S NAME	- Caring out a re- containing date 10.	TITLE	——————————————————————————————————————
		TELE PHONE	
COMMUNITY NAME			
SIGNATURE		DATE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
COMMENTS		**************************************	
		EMMONIA CONTRACTOR CON	HILLY WAS A CONTROL OF THE STATE OF THE STAT
			Check here if attachments