

FEDERAL EMERGENCY MANAGEMENT AGENCY  
 NATIONAL FLOOD INSURANCE PROGRAM  
**ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077  
 Expires December 31, 2005

*3050-2016*

Important: Read the instructions on pages 1-7.

<b>SECTION A - PROPERTY OWNER INFORMATION</b>		
BUILDING OWNER'S NAME JOHN & VIRGINIA ADAMS		For Insurance Company Use: Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 5218 INDIAN BLUFF DRIVE		Company NAIC Number
CITY PANAMA CITY	STATE FL	ZIP CODE 32466
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 4, UNRECORDED PLAT OF HIGDON, COOPER & FOLDS INDIAN BLUFF PROPERTY IN SECTION 17, TOWNSHIP 2 SOUTH, RANGE 13 WEST		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) (##° -##' -###" or #######°)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): _____ <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 12005C0230		B2. COUNTY NAME BAY		B3. STATE FL	
B4. MAP AND PANEL NUMBER 120004 0230	B5. SUFFIX G	B6. FIRM INDEX DATE 9-18-02	B7. FIRM PANEL EFFECTIVE/REVISED DATE 9-18-02	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 8 FEET

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 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/A1-A30, AR/AH, AR/AO  
 Complete Items C3.-a-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 NGVD 29 Conversion/Comments N/A  
 Elevation reference mark used RM233 Does the elevation reference mark used appear on the FIRM?  Yes  No

- o a) Top of bottom floor (including basement or enclosure) 19.4 ft.(m)
- o b) Top of next higher floor NA. ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) NA. ft.(m)
- o d) Attached garage (top of slab) 18.9 ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 18.5 ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) 18.2 ft.(m)
- o g) Highest adjacent (finished) grade (HAG) 18.7 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 0
- o i) Total area of all permanent openings (flood vents) in C3.h N/A sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

*Robert B. Nations, Jr.*  
 12-29-05

**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  
 ROBERT B. NATIONS, JR. LICENSE NUMBER 4111

TITLE  
 PROFESSIONAL SURVEYOR & MAPPER COMPANY NAME NATIONS LAND SURVEYING, LLC

ADDRESS  
 POST OFFICE BOX 162 CITY WEWAHITCHKA STATE FL ZIP CODE 32465

SIGNATURE  
*Robert B. Nations, Jr.* DATE 10-29-05 TELEPHONE 850-639-6199

*D.S. 12/7/05*