

AE

506-0484

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name NEXTEL PARTNERS		For Insurance Company Use:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6334 GRASSY POINT ROAD		Policy Number	
City SOUTHPORT		Company NAIC Number	
State FLORIDA	ZIP Code 33634		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PARCEL ID 08643-000-000			

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **NON RESIDENTIAL**

A5. Latitude/Longitude: Lat. **30DEG 15'57.6" N** Long. **85DEG 38'27.1" W** Horizontal Datum: NAD 1927 NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number **5**

A8. For a building with a crawl space or enclosure(s), provide:

a) Square footage of crawl space or enclosure(s) _____ sq ft

b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____

c) Total net area of flood openings in A8.b _____ sq in

A9. For a building with an attached garage, provide:

a) Square footage of attached garage _____ sq ft

b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____

c) Total net area of flood openings in A9.b _____ sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number BAY 12005		B2. County Name BAY		B3. State FLORIDA	
B4. Map/Panel Number 12005C 0219	B5. Suffix G	B6. FIRM Index Date 9/18/2002	B7. FIRM Panel Effective/Revised Date 9/18/2002	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) ELEV = 7

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other (Describe) _____

B11. Indicate elevation datum used for BFE in Item 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 _____ CBRS OPA

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. 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 C2.a-g below according to the building diagram specified in Item A7.

Benchmark Utilized **NGS PID BG2556** Vertical Datum **NAVD 88**

Conversion/Comments **USED CORPSCON v6.0.1 FOR CONVERSION OF NGVD 88 TO NGVD 29**

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	12.25	<input checked="" type="checkbox"/>	feet	<input type="checkbox"/>	meters (Puerto Rico only)
b) Top of the next higher floor	22.20	<input checked="" type="checkbox"/>	feet	<input type="checkbox"/>	meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)		<input type="checkbox"/>	feet	<input type="checkbox"/>	meters (Puerto Rico only)
d) Attached garage (top of slab)		<input type="checkbox"/>	feet	<input type="checkbox"/>	meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)		<input type="checkbox"/>	feet	<input type="checkbox"/>	meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	6.24	<input checked="" type="checkbox"/>	feet	<input type="checkbox"/>	meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	6.38	<input checked="" type="checkbox"/>	feet	<input type="checkbox"/>	meters (Puerto Rico only)

Handwritten: 6/13/06 FINAL

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 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.

Check here if comments are provided on back of form.

Certifier's Name **WILLIAM H. SOMMERVILLE III** License Number **0006141**

Title **PRESIDENT** Company Name **SMW ENGINEERING INC.**

Address **208 OAK MOUNTAIN CENTRE** City **PELHAM** State **ALABAMA** ZIP Code **35124**

Signature *William H. Somerville III* Date **6/7/06** Telephone **205-252-6985**

Handwritten signature: William H. Somerville III
6/9/06